	Facility Name	Roosevelt Warm Springs Rehabilitation Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		·
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	2,566,002
11	payments for services	2,375,193
12	annual covered charges	2,566,002
13	annual payments for services	2,375,193
14		
15	inpatient CCR	1.0496335
16		
17	annual cost of services	2,693,362
18		
	adjustment factor	
	inflation	1.032094
21		
	adjusted annual charges	2,648,355
	adjusted Medicaid payments for services	2,451,422
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	2,451,422
	adjusted cost of services	2,779,803
27		
	other UPL calculation data	
	provider category for UPL calculation	State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.543572
	maximum annual payments (at DRG differential)	3,783,947
33	manufacture and control of the control	2 702 047
	maximum annual payments	3,783,947
36	facility specific UPL amount	1,332,525
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	0
	allocation of GFL amounts < 0	(313,180)
	total aggregate limit adjustments	(313,180)
41	total apprepare milit aujustments	(313,160)
	UPL amount after aggregate limit adjustments	1,019,345
	Amount paid in April 2013 for 1st - 3rd quarters	764,509
	SFY2013 4th quarter UPL adjustment	254,836
	Outpatient overpayment reduction	(2,943)
	UPL funds - payout or recovery	251,893
	Intergovernmental transfer amount	86,752
77	Net funds amount	165,141
		100,141

	Facility Name	Georgia Health Sciences Medical Center
2		07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	Citi Status (1 yes)	Ç
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	100,238,107
11	payments for services	35,230,821
12	annual covered charges	100,238,107
13	annual payments for services	35,230,821
14		
15	inpatient CCR	0.409169204
16		
17	annual cost of services	41,014,346
18		
19	adjustment factor	
	inflation	1.032094
21		
22	adjusted annual charges	103,455,149
	adjusted Medicaid payments for services	36,361,519
	supplemental rate adjustment payments	4,958,525
	total adjusted Medicaid payments	41,320,044
	adjusted cost of services	42,330,660
27	,	, ,
28	other UPL calculation data	
	provider category for UPL calculation	State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.543572
	maximum annual payments (at DRG differential)	56,126,639
33	, , , , ,	, ,
	maximum annual payments	56,126,639
	facility specific UPL amount	14,806,595
36	, .	, ,
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	0
	allocation of supplemental payments	313,180
	total aggregate limit adjustments	313,180
41	,	,
	UPL amount after aggregate limit adjustments	15,119,775
	Amount paid in April 2013 for 1st - 3rd quarters	11,339,831
	SFY2013 4th quarter UPL adjustment	3,779,944
	Outpatient overpayment reduction	(1,336,130)
	UPL funds - payout or recovery	2,443,814
	Intergovernmental transfer amount	841,649
. •	Net funds amount	1,602,165
		=, : 3 = , = 3 =

	Facility Name	Appling Hospital	
2	base period report period beginning date	11 0 1	09/01/09
3	base period report period ending date		08/31/10
4			
5	adjustment factor (if period not equal to 1 year)		1.0000
6 7	CAH status (1 = yes)		0
8	CATI Status (1 – yes)		O
9	Medicaid inpatient claims paid at amount > 0:		
10	covered charges		3,513,263
	payments for services		1,228,282
	annual covered charges		3,513,263
13	annual payments for services		1,228,282
14			, -, -
	inpatient CCR		0.310568119
16			
17	annual cost of services		1,091,107
18			_,00,_0
_	adjustment factor		
20	inflation		1.024440
21			1.02 1110
22	adjusted annual charges		3,599,127
23	adjusted Medicaid payments for services		1,258,301
24	supplemental rate adjustment payments		0
	total adjusted Medicaid payments		1,258,301
	adjusted cost of services		1,117,774
27	aujusted cost of services		1,117,774
	other UPL calculation data		
29		Non-State Govt.	
30		DRG differential	
		DKG dillerential	1.247124
	DRG differential adjustment rate maximum annual payments (at DRG differential)		
32 33	maximum annual payments (at DNG unferential)		1,569,257
	maximum annual payments		1,569,257
	facility specific UPL amount		
35 36	facility specific OFE amount		310,956
37	aggregate limit adjustments		
			(076)
39	allocation of UPL amounts < 0 allocation of supplemental payments		(976) (128,299)
	total aggregate limit adjustments		(129,275)
41	LIDI amount after aggregate limit adjustments		101 601
	UPL amount after aggregate limit adjustments		181,681 126,261
43	· · · · · · · · · · · · · · · · · · ·		136,261
	SFY2013 4th quarter UPL adjustment		45,420 (12,240)
	Outpatient overpayment reduction		(12,340)
	UPL funds - payout or recovery		33,080
47			11,393
	Net funds amount		21,687

	Facility Name	Athens Regional Medical Center
2	base period report period beginning date	10/01/09
3 4	base period report period ending date	09/30/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
_	covered charges	50,547,578
	payments for services	14,422,965
	annual covered charges	50,547,578
	annual payments for services	14,422,965
14	. ,	, ,
15	inpatient CCR	0.356950592
16	•	
17	annual cost of services	18,042,988
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	51,591,638
23	adjusted Medicaid payments for services	14,720,871
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	14,720,871
26	adjusted cost of services	18,415,666
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	18,358,750
33		
	maximum annual payments	18,358,750
35	facility specific UPL amount	3,637,879
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(11,421)
	allocation of supplemental payments	(1,500,963)
	total aggregate limit adjustments	(1,512,384)
41		2.425
	UPL amount after aggregate limit adjustments	2,125,495
	Amount paid in April 2013 for 1st - 3rd quarters	1,594,121
	SFY2013 4th quarter UPL adjustment	531,374
	Outpatient overpayment reduction	(258,376)
	UPL funds - payout or recovery	272,999
4/	Intergovernmental transfer amount	94,021
	Net funds amount	178,978

	Facility Name	Burke Medical Center
2	base period report period beginning date	06/01/09
3	base period report period ending date	05/31/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	1,026,581
	payments for services	859,637
12	annual covered charges	1,026,581
13	annual payments for services	859,637
14		
15	inpatient CCR	0.668028999
16		
17	annual cost of services	685,786
18		
19	adjustment factor	
20	inflation	1.036494
21		
22	adjusted annual charges	1,064,045
23	adjusted Medicaid payments for services	891,009
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	891,009
26	adjusted cost of services	710,813
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	1,111,199
33		
34	maximum annual payments	1,111,199
35	facility specific UPL amount	220,190
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(691)
39	allocation of supplemental payments	(90,849)
40	total aggregate limit adjustments	(91,540)
41		
42	UPL amount after aggregate limit adjustments	128,650
43	Amount paid in April 2013 for 1st - 3rd quarters	96,488
44	SFY2013 4th quarter UPL adjustment	32,162
45	Outpatient overpayment reduction	(15,452)
46	UPL funds - payout or recovery	16,711
47	Intergovernmental transfer amount	5,755
	Net funds amount	10,956

	Facility Name	Children's Healthcare of Atlanta- Hughes Spalding
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		, ,
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	3,894,191
11	payments for services	1,717,271
12	annual covered charges	3,894,191
13	annual payments for services	1,717,271
14		
15	inpatient CCR	0.342420078
16		
17	annual cost of services	1,333,449
18		
19	adjustment factor	
20	inflation	1.022716
21		
22	adjusted annual charges	3,982,651
23	adjusted Medicaid payments for services	1,756,281
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	1,756,281
26	adjusted cost of services	1,363,740
27		
28	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	2,190,300
33		
34	maximum annual payments	2,190,300
	facility specific UPL amount	434,019
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(1,363)
39	allocation of supplemental payments	(179,073)
	total aggregate limit adjustments	(180,436)
41		
42	UPL amount after aggregate limit adjustments	253,583
	Amount paid in April 2013 for 1st - 3rd quarters	190,187
	SFY2013 4th quarter UPL adjustment	63,396
	Outpatient overpayment reduction	(121,144)
	UPL funds - payout or recovery	(57,748)
	Intergovernmental transfer amount	(19,888)
	Net funds amount	(37,860)

_	Facility Name	Coffee Regional Medical Center
	base period report period beginning date	01/01/10
3 4	base period report period ending date	12/31/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
	CAH status (1 = yes)	0
	Medicaid inpatient claims paid at amount > 0:	
	covered charges	8,373,746
	payments for services	3,512,966
	annual covered charges	8,373,746
	annual payments for services	3,512,966
14		-,- ,
15	inpatient CCR	0.388843875
16	•	
17	annual cost of services	3,256,080
18		, ,
19	adjustment factor	
	inflation	1.022716
21		
22	adjusted annual charges	8,563,964
23	adjusted Medicaid payments for services	3,592,767
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	3,592,767
26	adjusted cost of services	3,330,045
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	4,480,626
33		
34	maximum annual payments	4,480,626
35	facility specific UPL amount	887,859
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(2,787)
	allocation of supplemental payments	(366,324)
40	total aggregate limit adjustments	(369,111)
41		
	UPL amount after aggregate limit adjustments	518,748
	Amount paid in April 2013 for 1st - 3rd quarters	389,061
	SFY2013 4th quarter UPL adjustment	129,687
	Outpatient overpayment reduction	(71,923)
	UPL funds - payout or recovery	57,764
47	Intergovernmental transfer amount	19,894
	Net funds amount	37,870

	Facility Name	Colquitt Regional Medical Center
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4	adjusting out featon (if you and you among to 1 years)	1 0000
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	, , ,	
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	5,945,619
11	payments for services	2,809,797
12	annual covered charges	5,945,619
13	annual payments for services	2,809,797
14		
15	inpatient CCR	0.526106197
16		
17	annual cost of services	3,128,027
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	6,068,426
23	adjusted Medicaid payments for services	2,867,833
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	2,867,833
26	adjusted cost of services	3,192,636
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30		DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	3,576,543
33		
34	maximum annual payments	3,576,543
	facility specific UPL amount	708,710
36	, ,	·
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(2,225)
	allocation of supplemental payments	(292,409)
	total aggregate limit adjustments	(294,634)
41	,	, , ,
	UPL amount after aggregate limit adjustments	414,076
	Amount paid in April 2013 for 1st - 3rd quarters	310,557
	SFY2013 4th quarter UPL adjustment	103,519
	Outpatient overpayment reduction	(79,475)
	UPL funds - payout or recovery	24,044
	Intergovernmental transfer amount	8,281
-	Net funds amount	15,763
		- /

	Facility Name	Cook Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7	CALL status (1 – vos)	0
8	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	1 104 506
	payments for services	1,104,506 541,723
	annual covered charges	1,104,506
	annual payments for services	541,723
14		0.4004.45000
	inpatient CCR	0.430146338
16		
17	annual cost of services	475,099
18		
	<u>adjustment factor</u>	
20	inflation	1.032094
21		
22	adjusted annual charges	1,139,954
23	adjusted Medicaid payments for services	559,109
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	559,109
26	adjusted cost of services	490,347
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	697,278
33		
34	maximum annual payments	697,278
	facility specific UPL amount	138,169
36	, .	
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(434)
	allocation of supplemental payments	(57,007)
	total aggregate limit adjustments	(57,441)
41		(0-1)-1-1
	UPL amount after aggregate limit adjustments	80,728
	Amount paid in April 2013 for 1st - 3rd quarters	40,364
	SFY2013 4th quarter UPL adjustment	0
	Outpatient overpayment reduction	(7,833)
	UPL funds - payout or recovery	(7,833)
	Intergovernmental transfer amount	(2,577)
4/	Net funds amount	
	ivet runus annount	(5,256)

	Facility Name	Crisp Regional Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	4,496,694
11	payments for services	2,265,309
12	annual covered charges	4,496,694
13	annual payments for services	2,265,309
14		
15	inpatient CCR	0.485417321
16		
17	annual cost of services	2,182,773
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	4,641,011
23	adjusted Medicaid payments for services	2,338,012
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	2,338,012
26	adjusted cost of services	2,252,827
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	2,915,791
33		
34	maximum annual payments	2,915,791
35	facility specific UPL amount	577,779
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(1,814)
39	allocation of supplemental payments	(238,387)
40	total aggregate limit adjustments	(240,201)
41		
42	UPL amount after aggregate limit adjustments	337,578
43	Amount paid in April 2013 for 1st - 3rd quarters	253,184
44	SFY2013 4th quarter UPL adjustment	84,394
	Outpatient overpayment reduction	(33,189)
46	UPL funds - payout or recovery	51,205
47	0	17,635
	Net funds amount	33,570

	Facility Name	Dekalb Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	55,142,828
11	payments for services	19,800,023
12	annual covered charges	55,142,828
13	annual payments for services	19,800,023
14		
15	inpatient CCR	0.409630157
16		
17	annual cost of services	22,588,165
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	56,912,582
23	adjusted Medicaid payments for services	20,435,485
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	20,435,485
26	adjusted cost of services	23,313,110
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	25,485,582
33		
34	maximum annual payments	25,485,582
35	facility specific UPL amount	5,050,097
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(15,854)
39	allocation of supplemental payments	(2,083,633)
40	total aggregate limit adjustments	(2,099,487)
41		
42	UPL amount after aggregate limit adjustments	2,950,610
43	Amount paid in April 2013 for 1st - 3rd quarters	2,212,958
44	SFY2013 4th quarter UPL adjustment	737,652
45	' ',	(220,989)
46	UPL funds - payout or recovery	516,663
47		177,939
	Net funds amount	338,724

	Facility Name	Dekalb Medical Center - Hillandale
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8 9	Modicaid innationt claims paid at amount > 0:	
	Medicaid inpatient claims paid at amount > 0: covered charges	7.058.076
	payments for services	7,958,976 2,773,939
	annual covered charges	7,958,976
	annual payments for services	2,773,939
14	ailliaal payillelits for services	2,773,939
	inpatient CCR	0.466282786
16	inpatient cen	0.400282780
_	annual cost of services	3,711,134
18	ailitual Cost of Services	3,711,134
_	adjustment factor	
	inflation	1.032094
21	imation	1.032034
	adjusted annual charges	8,214,411
	adjusted Medicaid payments for services	2,862,966
	supplemental rate adjustment payments	2,552,550
	total adjusted Medicaid payments	2,862,966
	adjusted cost of services	3,830,239
27	adjusted cost of services	3,030,233
	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	3,570,473
33	(5/2:5/::2
	maximum annual payments	3,570,473
	facility specific UPL amount	707,507
36	,	,
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(2,221)
	allocation of supplemental payments	(291,912)
	total aggregate limit adjustments	(294,133)
41	-3 2	, , ,
42	UPL amount after aggregate limit adjustments	413,374
	Amount paid in April 2013 for 1st - 3rd quarters	310,031
	SFY2013 4th quarter UPL adjustment	103,343
	Outpatient overpayment reduction	(108,273)
	UPL funds - payout or recovery	(4,930)
	Intergovernmental transfer amount	(1,698)
	Net funds amount	(3,232)

2 base period report period beginning date 3 base period report period ending date 4		Facility Name	Doctors Hospital - Columbus
4 5 adjustment factor (if period not equal to 1 year) 1.0000 6 7 CAH status (1 = yes) 0 8 9 Medicaid inpatient claims paid at amount > 0: 12,546,896 10 covered charges 12,546,896 11 payments for services 3,020,033 12 annual covered charges 12,546,896 13 annual payments for services 3,020,033 14 15 inpatient CCR 0,31327937 16 7 annual cost of services 3,930,684 18 2 adjustment factor 10,32094 19 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 0 26 total adjusted Medicaid payments 3,116,958 27 adjusted Oxed Medicaid payments 3,116,958 28 other UPL calculation data 1 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1,247124 32 maximum annual payments (at DRG differential) 3,887,233 33 facility specific UPL amount 770,275 <t< td=""><td>2</td><td>-</td><td>· ·</td></t<>	2	-	· ·
5 adjustment factor (if period not equal to 1 year) 1.0000 6 CAH status (1 = yes) 0 7 CAH status (1 = yes) 0 8 Wedicaid inpatient claims paid at amount > 0: 10 covered charges 12,546,896 11 payments for services 3,020,033 12 annual covered charges 12,546,896 13 annual payments for services 3,020,033 14 To inpatient CCR 0.31327937 15 inpatient CCR 0.31327937 16 To annual cost of services 3,930,684 18 To annual cost of services 3,930,684 18 To inflation 1.032094 18 To inflation 1.032094 19 adjusted annual charges 12,949,576 20 adjusted Amoula charges 12,949,576 21 adjusted Medicaid payments for services 3,116,958 25 suplemental rate adjustment payments 3,116,958 26 adjusted Cost of services 4,056,835 27 To intertuple calculation data 10 29 </td <td>3</td> <td>base period report period ending date</td> <td>06/30/10</td>	3	base period report period ending date	06/30/10
6 CAH status (1 = yes) 0 7 CAH status (1 = yes) 0 8 8 9 Medicaid inpatient claims paid at amount > 0: 10 covered charges 12,546,896 11 payments for services 3,020,033 12 annual payments for services 0.31327937 15 inpatient CCR 0.31327937 16 adjustment factor 10 17 annual cost of services 3,930,684 18 adjustment factor 1,032094 19 adjusted annual charges 12,949,576 20 adjusted Amedicaid payments for services 3,116,958 21 supplemental rate adjustment payments 0 0,585 22 adjusted Medicaid payments 3,16,958 3,116,958 23 adjusted cost of services 4,056,835 4,056,835 27 total adjusted Medicaid payments 3,16,958 26 adjusted cost of services 4,056,835 27 meximum annual payments (at DRG differential) Non-State Govt. 20 basis for UPL calculation of DRG differential ma	4		
7 CAH status (1 = yes) 0 8 Medicaid inpatient claims paid at amount > 0: 10 covered charges 12,546,896 11 payments for services 3,020,033 12 annual covered charges 12,546,896 13 annual payments for services 3,020,033 16 inpatient CCR 0.31327937 16 inpatient CCR 0.31327937 17 annual cost of services 3,930,684 18 adjustment factor 1.032094 10 adjusted Medicaid payments for services 3,116,958 2 adjusted Medicaid payments for services 3,116,958 2 supplemental rate adjustment payments 0.52 2 total adjusted Medicaid payments 3,116,958 2 adjusted cost of services 4,056,835 2 other UPL calculation data 100,000 2 provider category for UPL calculation Non-State Govt. 3 basis for UPL calculation DRG differential 3 maximum annual payments (at DRG differential) 3,887,233 3 facility specific UPL amount 770,275 3 aggregate limit adjustments 3,287,233 3 allocation of Supplemental payments 317,810 4 total aggregate limit adjustments		adjustment factor (if period not equal to 1 year)	1.0000
9 Medicaid inpatient claims paid at amount > 0: 12,546,896 10 covered charges 3,020,033 11 payments for services 3,020,033 12 annual payments for services 3,020,033 14	7	CAH status (1 = yes)	0
10 covered charges 12,546,896 11 payments for services 3,020,033 12 annual covered charges 12,546,896 13 annual payments for services 3,020,033 14 response of the payments for services 0.31327937 16 response of the payments for services 3,930,684 17 annual cost of services 3,930,684 18 response of the payment factor 10,032094 20 inflation 1.032094 21 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 differential adjusted Cost of services 4,056,835 28 other UPL calculation data DRG differential 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1,247124 32 maximum annual payments (at DRG differential) 3,887,233 33 facility specific UPL amount 7,0,275			
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12 annual covered charges 12,546,896 13 annual payments for services 3,020,033 14 Inpatient CCR 0.31327937 15 Inpatient CCR 3,930,684 17 annual cost of services 3,930,684 18 Inflation 1.032094 21 Inflation 1.032094 22 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 btotal adjusted Cost of services 4,056,835 28 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 payments 1,247124 32 maximum annual payments (at DRG differential) 3,887,233 33 facility specific UPL amount 770,275 36 allocation of UPL amounts < 0			
13 annual payments for services 3,020,033 14 inpatient CCR 0.31327937 16 annual cost of services 3,930,684 17 annual cost of services 3,930,684 19 adjustment factor 1.032094 21 inflation 1.032094 22 adjusted Annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted Cost of services 4,056,835 27 total adjusted Medicaid payments 0 28 other UPL calculation data 1 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 35 facility specific UPL amount 770,275 36 aggregate limit adjustments (2,418) 310 cation of supplemental p			
14 0.31327937 16 0.31327937 17 annual cost of services 3,930,684 18 3 19 adjustment factor 1.032094 20 inflation 1.032094 21 2 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 other UPL calculation data Provider category for UPL calculation 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 35 facility specific UPL amount 770,275 36 allocation of UPL amounts < 0			
15 inpatient CCR 0.31327937 16 annual cost of services 3,930,684 18 adjustment factor 1.032094 20 inflation 1.032094 21 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 total adjusted Medicaid payments 3,116,958 28 other UPL calculation data Provider category for UPL calculation 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 35 facility specific UPL amount 770,275 36 aggregate limit adjustments (2,418) 310 cation of UPL amounts < 0		annual payments for services	3,020,033
16 3,930,684 17 annual cost of services 3,930,684 18 adjustment factor 1,032094 20 inflation 1,032094 21 21 22 22 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 4,056,835 4,056,835 28 other UPL calculation data DRG differential 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1,247124 32 maximum annual payments (at DRG differential) 3,887,233 33 facility specific UPL amount 770,275 36 aggregate limit adjustments (2,418) 34 allocation of UPL amounts < 0			
17 annual cost of services 3,930,684 18		inpatient CCR	0.31327937
18 adjustment factor 20 inflation 1.032094 21 1.032094 22 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 28 other UPL calculation data 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 33 facility specific UPL amount 770,275 36 aggregate limit adjustments (2,418) 39 allocation of UPL amounts < 0			
19 20 10 inflation1.03209421 21 22 23 24 25 26 26 27 27 28 28 29 29 29 20		annual cost of services	3,930,684
20inflation1.03209421adjusted annual charges12,949,57623adjusted Medicaid payments for services3,116,95824supplemental rate adjustment payments025total adjusted Medicaid payments3,116,95826adjusted cost of services4,056,83527total adjusted cost of services4,056,83528other UPL calculation dataProvider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)3,887,23333maximum annual payments3,887,23335facility specific UPL amount770,27536770,27537aggregate limit adjustments(2,418)39allocation of UPL amounts < 0			
21 2 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 28 other UPL calculation data 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 33 33 4		-	
22 adjusted annual charges 12,949,576 23 adjusted Medicaid payments for services 3,116,958 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 3,116,958 26 adjusted cost of services 4,056,835 27 28 other UPL calculation data 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 33 34 maximum annual payments 3,887,233 35 facility specific UPL amount 770,275 36 37 aggregate limit adjustments 38 allocation of UPL amounts < 0 (2,418) 39 allocation of supplemental payments (317,810) 40 total aggregate limit adjustments (320,228) 41 42 UPL amount after aggregate limit adjustments		inflation	1.032094
23adjusted Medicaid payments for services3,116,95824supplemental rate adjustment payments025total adjusted Medicaid payments3,116,95826adjusted cost of services4,056,83527The UPL calculation data29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)3,887,23333maximum annual payments3,887,23335facility specific UPL amount770,2753672ggregate limit adjustments38allocation of UPL amounts < 0			
24supplemental rate adjustment payments025total adjusted Medicaid payments3,116,95826adjusted cost of services4,056,8352728other UPL calculation data29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)3,887,23333maximum annual payments3,887,23335facility specific UPL amount770,275367aggregate limit adjustments38allocation of UPL amounts < 0	22		
total adjusted Medicaid payments adjusted cost of services 4,056,835 7 8 other UPL calculation data provider category for UPL calculation basis for UPL calculation DRG differential DRG differential adjustment rate 1.247124 maximum annual payments (at DRG differential) maximum annual payments facility specific UPL amount gaggregate limit adjustments allocation of UPL amounts < 0 aggregate limit adjustments blocation of supplemental payments total aggregate limit adjustments UPL amount after aggregate limit adjustments 450,047	23		3,116,958
26 adjusted cost of services 27 28 other UPL calculation data 29 provider category for UPL calculation 30 basis for UPL calculation 31 DRG differential adjustment rate 32 maximum annual payments (at DRG differential) 33 maximum annual payments 34 maximum annual payments 35 facility specific UPL amount 37 aggregate limit adjustments 38 allocation of UPL amounts < 0 (2,418) 39 allocation of supplemental payments 40 total aggregate limit adjustments 41 UPL amount after aggregate limit adjustments 42 UPL amount after aggregate limit adjustments			
27 Other UPL calculation data 28 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 33 34 maximum annual payments 3,887,233 35 facility specific UPL amount 770,275 36 37 aggregate limit adjustments 38 allocation of UPL amounts < 0 (2,418) 39 allocation of supplemental payments (317,810) 40 total aggregate limit adjustments 41 42 UPL amount after aggregate limit adjustments			
28other UPL calculation data29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)3,887,2333334maximum annual payments3,887,23335facility specific UPL amount770,2753670(2,418)38allocation of UPL amounts < 0		adjusted cost of services	4,056,835
29 provider category for UPL calculation			
30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 3,887,233 33 34 maximum annual payments 3,887,233 35 facility specific UPL amount 770,275 36 37 aggregate limit adjustments 38 allocation of UPL amounts < 0 (2,418) 39 allocation of supplemental payments (317,810) 40 total aggregate limit adjustments 41 42 UPL amount after aggregate limit adjustments	28	other UPL calculation data	
31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)3,887,23333333,887,23334maximum annual payments3,887,23335facility specific UPL amount770,27536363737aggregate limit adjustments 38410cation of UPL amounts < 0 310cation of supplemental payments 317,810(2,418)40total aggregate limit adjustments 450,047(320,228)41450,047			
maximum annual payments (at DRG differential) 3,887,233 maximum annual payments 3,887,233 facility specific UPL amount 770,275 aggregate limit adjustments allocation of UPL amounts < 0 (2,418) allocation of supplemental payments total aggregate limit adjustments (317,810) total aggregate limit adjustments (320,228) UPL amount after aggregate limit adjustments 450,047			
33 maximum annual payments 3,887,233 35 facility specific UPL amount 770,275 36 7 aggregate limit adjustments 38 allocation of UPL amounts < 0 (2,418) 39 allocation of supplemental payments (317,810) 40 total aggregate limit adjustments (320,228) 41 42 UPL amount after aggregate limit adjustments			
34maximum annual payments3,887,23335facility specific UPL amount770,27536		maximum annual payments (at DRG differential)	3,887,233
35facility specific UPL amount770,275363637aggregate limit adjustments2038allocation of UPL amounts < 0			
36aggregate limit adjustments38allocation of UPL amounts < 0			
37aggregate limit adjustments38allocation of UPL amounts < 0		facility specific UPL amount	770,275
38allocation of UPL amounts < 0			
39 allocation of supplemental payments (317,810) 40 total aggregate limit adjustments (320,228) 41 42 UPL amount after aggregate limit adjustments 450,047			
40 total aggregate limit adjustments (320,228) 41 42 UPL amount after aggregate limit adjustments 450,047			The state of the s
41 42 UPL amount after aggregate limit adjustments 450,047			
42 UPL amount after aggregate limit adjustments 450,047	40	total aggregate limit adjustments	(320,228)
43 Amount paid in April 2013 for 1st - 3rd quarters 337,535		55 5	
			-
44 SFY2013 4th quarter UPL adjustment 112,512		· · · · · · · · · · · · · · · · · · ·	-
45 Outpatient overpayment reduction (90,562)			
46 UPL funds - payout or recovery 21,950			-
47 Intergovernmental transfer amount 7,560	47	=	
Net funds amount 14,390		Net funds amount	14,390

	Facility Name	Dodge County Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	2,919,677
11	payments for services	1,576,715
12	annual covered charges	2,919,677
13	annual payments for services	1,576,715
14		
15	inpatient CCR	0.436291942
16		
17	annual cost of services	1,273,832
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	2,979,983
23	adjusted Medicaid payments for services	1,609,282
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	1,609,282
26	adjusted cost of services	1,300,143
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	2,006,974
33		
34	maximum annual payments	2,006,974
35	facility specific UPL amount	397,692
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(1,248)
39	allocation of supplemental payments	(164,085)
40	total aggregate limit adjustments	(165,333)
41		
42	UPL amount after aggregate limit adjustments	232,359
	Amount paid in April 2013 for 1st - 3rd quarters	174,269
	SFY2013 4th quarter UPL adjustment	58,090
	Outpatient overpayment reduction	(49,466)
	UPL funds - payout or recovery	8,624
47		2,970
	Net funds amount	5,654

	Facility Name	Elbert Memorial Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	Madissid investigat plains and at amount > 0.	
9	Medicaid inpatient claims paid at amount > 0:	920 (52
	covered charges	829,652
	payments for services	429,563
	annual covered charges	829,652
13	annual payments for services	429,563
14	innationt CCD	0.204215002
	inpatient CCR	0.394315882
16	annual cost of comicos	227 145
17	annual cost of services	327,145
18	adjustment factor	
	adjustment factor inflation	1.032094
21	imation	1.032094
	adjusted annual charges	856,279
23	adjusted Medicaid payments for services	443,349
24	supplemental rate adjustment payments	443,349
	total adjusted Medicaid payments	443,349
	adjusted cost of services	337,644
27	adjusted cost of services	337,044
	other UPL calculation data	
29		Non-State Govt.
30	provider category for UPL calculation basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	552,911
33	maximum annual payments (at DNO unferential)	332,311
34	maximum annual payments	552,911
35	facility specific UPL amount	109,562
36	racinty specific of Lamount	103,302
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(344)
	allocation of supplemental payments	(45,205)
	total aggregate limit adjustments	(45,549)
41	total aggregate milit adjustments	(+3,5+3)
	UPL amount after aggregate limit adjustments	64,013
	Amount paid in April 2013 for 1st - 3rd quarters	48,010
	SFY2013 4th quarter UPL adjustment	16,003
	Outpatient overpayment reduction	(16,542)
	UPL funds - payout or recovery	(539)
47		(186)
٦,	Net funds amount	(353)
	rice rands unrount	(333)

	Facility Name	Emanuel Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	CATT Status (1 – yes)	Ü
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	2,435,910
	payments for services	1,036,411
	annual covered charges	2,435,910
	annual payments for services	1,036,411
14	annual payments for services	1,030,411
	inpatient CCR	0.402730662
16	inpution con	0.402730002
17	annual cost of services	981,016
18	annual cost of selvices	301,010
	adjustment factor	
	inflation	1.032094
21		1.03203
	adjusted annual charges	2,514,088
23	adjusted Medicaid payments for services	1,069,674
24		0
	total adjusted Medicaid payments	1,069,674
26	adjusted cost of services	1,012,501
27	adjusted cost of services	1,012,301
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
32		1,334,016
33	maximum annual payments (at 5116 annerential)	1,334,010
	maximum annual payments	1,334,016
	facility specific UPL amount	264,342
36	radinty specific of Lambant	20 1,3 12
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(830)
	allocation of supplemental payments	(109,066)
	total aggregate limit adjustments	(109,896)
41	total aggi ogato illini adjaotinonto	(200,000)
	UPL amount after aggregate limit adjustments	154,446
	Amount paid in April 2013 for 1st - 3rd quarters	115,835
	SFY2013 4th quarter UPL adjustment	38,611
	Outpatient overpayment reduction	(34,955)
	UPL funds - payout or recovery	3,656
47		1,259
.,	Net funds amount	2,397
		2,337

	Facility Name	Erlanger at Hutcheson
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	8,088,610
	payments for services	2,571,332
	annual covered charges	8,088,610
13	annual payments for services	2,571,332
14		
15	inpatient CCR	0.434462717
16		
17	annual cost of services	3,514,199
18		
19	adjustment factor	
	inflation	1.020655
21		
22	adjusted annual charges	8,255,680
23	adjusted Medicaid payments for services	2,624,443
24		0
	total adjusted Medicaid payments	2,624,443
26		3,586,785
27	adjusted cost of services	3,300,703
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
32		3,273,006
33	maximum annual payments (at DNO unferential)	3,273,000
	maximum annual payments	2 272 006
	facility specific UPL amount	3,273,006 648,563
36	racinty specific or Lamount	048,303
	aggregate limit adjustments	
	aggregate limit adjustments	(2.026)
	allocation of UPL amounts < 0	(2,036)
	allocation of supplemental payments	(267,592)
	total aggregate limit adjustments	(269,628)
41	UNI annual of the second of th	270 225
	UPL amount after aggregate limit adjustments	378,935
	Amount paid in April 2013 for 1st - 3rd quarters	284,201
	SFY2013 4th quarter UPL adjustment	94,734
	Outpatient overpayment reduction	(104,890)
	UPL funds - payout or recovery	(10,156)
47	Intergovernmental transfer amount	(3,498)
	Net funds amount	(6,658)

	Facility Name	Evans Memorial Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	1,473,440
11	payments for services	559,365
12	annual covered charges	1,473,440
13	annual payments for services	559,365
14		
15	inpatient CCR	0.350580553
16		
17	annual cost of services	516,559
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	1,503,874
23	adjusted Medicaid payments for services	570,919
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	570,919
26	adjusted cost of services	527,229
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	712,007
33		
34	maximum annual payments	712,007
35	facility specific UPL amount	141,088
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(443)
39	allocation of supplemental payments	(58,212)
40	total aggregate limit adjustments	(58,655)
41		
42	UPL amount after aggregate limit adjustments	82,433
43	Amount paid in April 2013 for 1st - 3rd quarters	61,825
44	SFY2013 4th quarter UPL adjustment	20,608
45	Outpatient overpayment reduction	(12,485)
46	UPL funds - payout or recovery	8,123
47	0	2,798
	Net funds amount	5,325

base period report period ending date adjustment factor (if period not equal to 1 year) CAH status (1 = yes) Medicaid inpatient claims paid at amount > 0: covered charges payments for services annual covered charges annual payments for services 12 annual payments for services 12	07/01/09 06/30/10 1.0000 0 5,765,017 2,224,782
4 5 adjustment factor (if period not equal to 1 year) 6 7 CAH status (1 = yes) 8 9 Medicaid inpatient claims paid at amount > 0: 10 covered charges 11 payments for services 12 annual covered charges 13 annual payments for services 14	1.0000 0 5,765,017 2,224,782
5 adjustment factor (if period not equal to 1 year) 6 7 CAH status (1 = yes) 8 9 Medicaid inpatient claims paid at amount > 0: 10 covered charges 11 payments for services 12 annual covered charges 13 annual payments for services 14	0 5,765,017 2,224,782
6 7 CAH status (1 = yes) 8 9 Medicaid inpatient claims paid at amount > 0: 10 covered charges 11 payments for services 12 annual covered charges 13 annual payments for services 14	0 5,765,017 2,224,782
7 CAH status (1 = yes) 8 9 Medicaid inpatient claims paid at amount > 0: 10 covered charges 11 payments for services 12 annual covered charges 13 annual payments for services 14	5,765,017 2,224,782
9 Medicaid inpatient claims paid at amount > 0: 10 covered charges 45 11 payments for services 12 12 annual covered charges 45 13 annual payments for services 12	5,765,017 2,224,782
9 Medicaid inpatient claims paid at amount > 0: 10 covered charges 45 11 payments for services 12 12 annual covered charges 45 13 annual payments for services 12 14	2,224,782
10 covered charges 45 11 payments for services 12 12 annual covered charges 45 13 annual payments for services 12 14	2,224,782
11 payments for services1212 annual covered charges4513 annual payments for services121412	2,224,782
12 annual covered charges 45 13 annual payments for services 12 14	
13 annual payments for services 12	
14	,765,017
	2,224,782
15 inpatient CCR 0.37	
	0923537
16	
17 annual cost of services 16	5,975,322
18	
19 adjustment factor	
20 inflation	1.032094
21	
22 adjusted annual charges 47	,233,799
23 adjusted Medicaid payments for services 12	,617,124
24 supplemental rate adjustment payments	,138,065
25 total adjusted Medicaid payments 13	3,755,189
26 adjusted cost of services 17	,520,128
27	
28 other UPL calculation data	
29 provider category for UPL calculation Non-State Govt.	
30 basis for UPL calculation DRG differential	
31 DRG differential adjustment rate	1.247124
32 maximum annual payments (at DRG differential) 15	5,735,117
33	
34 maximum annual payments 15	,735,117
35 facility specific UPL amount 1,	979,928
36	
37 <u>aggregate limit adjustments</u>	
38 allocation of UPL amounts < 0	(9,788)
39 allocation of supplemental payments	(148,396)
40 total aggregate limit adjustments	(158,184)
41	
42 UPL amount after aggregate limit adjustments 1,	821,744
43 Amount paid in April 2013 for 1st - 3rd quarters 1,	366,308
44 SFY2013 4th quarter UPL adjustment	455,436
45 Outpatient overpayment reduction	(264,060)
46 UPL funds - payout or recovery	191,377
47 Intergovernmental transfer amount	65,910
Net funds amount	125,467

	Facility Name	Grady General Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	CAIT Status (1 - yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	1,822,256
	payments for services	796,081
	annual covered charges	1,822,256
13	annual payments for services	796,081
14	difficulty for services	750,001
15	inpatient CCR	0.547734628
16	inputient con	0.3 1,73 1020
17	annual cost of services	998,113
18	difficult cost of services	330,113
	adjustment factor	
20	inflation	1.020655
21	imation	1.020033
	adjusted annual charges	1,859,895
23	adjusted Medicaid payments for services	812,524
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	812,524
26	adjusted cost of services	1,018,729
27	adjusted cost of services	1,010,723
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	1,013,318
33	maximum annual payments (at DNG unterential)	1,013,318
34	maximum annual payments	1,013,318
35	facility specific UPL amount	200,794
36	racinty specific of Lamount	200,734
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(630)
39	allocation of supplemental payments	(82,846)
	total aggregate limit adjustments	(83,476)
41	total aggregate illine adjustments	(63,476)
	UPL amount after aggregate limit adjustments	117,318
	Amount paid in April 2013 for 1st - 3rd quarters	87,989
	SFY2013 4th quarter UPL adjustment	29,329
45		(14,918)
	UPL funds - payout or recovery	14,411
47	Intergovernmental transfer amount	4,963
4/	Net funds amount	9,448
	וויכנ ועוועס מוווטעוונ	9,448

	Facility Name	Grady Memorial Hospital
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		_
7	CAH status (1 = yes)	0
8	Madissid is action to be a second to the sec	
9	Medicaid inpatient claims paid at amount > 0:	265 572 754
	covered charges payments for services	265,573,751
	annual covered charges	81,706,957
	_	265,573,751
14	annual payments for services	81,706,957
	inpatient CCR	0.31376226
16	inpatient cen	0.31370220
17	annual cost of services	83,327,020
18	annual cost of services	03,327,020
	adjustment factor	
	inflation	1.022716
21	imation	1.022710
	adjusted annual charges	271,606,524
23	adjusted Medicaid payments for services	83,563,012
24	· ·	26,022,568
	total adjusted Medicaid payments	109,585,580
	adjusted cost of services	85,219,877
27		33,223,37
	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	104,213,432
33		
34	maximum annual payments	104,213,432
35	facility specific UPL amount	(5,372,148)
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(64,829)
39	allocation of supplemental payments	17,502,355
40	total aggregate limit adjustments	17,437,526
41		
	UPL amount after aggregate limit adjustments	12,065,378
	Amount paid in April 2013 for 1st - 3rd quarters	9,049,034
	SFY2013 4th quarter UPL adjustment	3,016,344
	Outpatient overpayment reduction	(788,270)
	UPL funds - payout or recovery	2,228,074
47	Intergovernmental transfer amount	767,349
	Net funds amount	1,460,725

	Facility Name	Gwinnett Medical Center - Duluth
2	base period report period beginning date	07/01/09
3 4	base period report period ending date	06/30/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
_	covered charges	5,713,285
	payments for services	2,174,007
	annual covered charges	5,713,285
	annual payments for services	2,174,007
14	ailliudi payments for services	2,174,007
15	inpatient CCR	0.556575
16	inpatient cen	0.550575
17	annual cost of services	3,179,872
18	annual cost of services	3,173,072
	adjustment factor	
	inflation	1.032094
21	imation	1.032034
	adjusted annual charges	5,896,647
	adjusted Medicaid payments for services	2,243,780
	supplemental rate adjustment payments	2,243,760
	total adjusted Medicaid payments	2,243,780
	adjusted cost of services	3,281,927
27	adjusted cost of services	3,201,327
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	2,798,272
33	maximum annual payments (at bits anterential)	2,730,272
34	maximum annual payments	2,798,272
35	facility specific UPL amount	554,492
36	racinty specific of Earnount	334,432
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(1,741)
39		(228,779)
	total aggregate limit adjustments	(230,520)
41	total aggregate mint adjustments	(230,320)
	UPL amount after aggregate limit adjustments	323,972
	Amount paid in April 2013 for 1st - 3rd quarters	242,979
	SFY2013 4th quarter UPL adjustment	80,993
	Outpatient overpayment reduction	(37,108)
	UPL funds - payout or recovery	43,885
	Intergovernmental transfer amount	15,114
٠,	Net funds amount	28,771
	aa. airioaire	20,771

	Facility Name	Gwinnett Medical Center - Lawrenceville
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	45,394,711
11	payments for services	18,742,851
12	annual covered charges	45,394,711
13	annual payments for services	18,742,851
14		
15	inpatient CCR	0.557819595
16		
17	annual cost of services	25,322,059
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	46,851,609
23	adjusted Medicaid payments for services	19,344,384
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	19,344,384
26	adjusted cost of services	26,134,745
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	24,124,844
33		
34	maximum annual payments	24,124,844
35	facility specific UPL amount	4,780,460
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(15,008)
39	allocation of supplemental payments	(1,972,383)
40	total aggregate limit adjustments	(1,987,391)
41		
42	UPL amount after aggregate limit adjustments	2,793,069
43	Amount paid in April 2013 for 1st - 3rd quarters	2,094,802
44	SFY2013 4th quarter UPL adjustment	698,267
	Outpatient overpayment reduction	(157,819)
	UPL funds - payout or recovery	540,449
47	Intergovernmental transfer amount	186,130
	Net funds amount	354,319

	Facility Name	Habersham Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	CAT Status (1 - yes)	O .
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	2,362,658
	payments for services	1,327,063
	annual covered charges	2,362,658
	annual payments for services	1,327,063
14	annual payments for services	1,327,003
	inpatient CCR	0.556262141
16	inpution con	0.330202111
17	annual cost of services	1,314,257
18		_,,,,
	adjustment factor	
	inflation	1.032094
21		
	adjusted annual charges	2,438,485
23	adjusted Medicaid payments for services	1,369,654
24		0
	total adjusted Medicaid payments	1,369,654
26		1,356,437
27	,	_,,
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
32		1,708,128
33	The same and a payments (at 2110 amerental)	_,,
	maximum annual payments	1,708,128
	facility specific UPL amount	338,474
36		
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(1,063)
	allocation of supplemental payments	(139,652)
	total aggregate limit adjustments	(140,715)
41	,	, , ,
	UPL amount after aggregate limit adjustments	197,759
	Amount paid in April 2013 for 1st - 3rd quarters	148,319
	SFY2013 4th quarter UPL adjustment	49,440
	Outpatient overpayment reduction	(28,634)
	UPL funds - payout or recovery	20,806
47		7,166
	Net funds amount	13,640
		•

	Facility Name	Houston Medical Center
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	17,766,508
11	payments for services	6,633,683
12	annual covered charges	17,766,508
13	annual payments for services	6,633,683
14		
15	inpatient CCR	0.476180547
16		
17	annual cost of services	8,460,066
18		
19	adjustment factor	
20	inflation	1.022716
21		
22	adjusted annual charges	18,170,092
23	adjusted Medicaid payments for services	6,784,374
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	6,784,374
26	adjusted cost of services	8,652,245
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	8,460,955
33		
34	maximum annual payments	8,460,955
35	facility specific UPL amount	1,676,581
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(5,263)
39	allocation of supplemental payments	(691,745)
40	total aggregate limit adjustments	(697,008)
41		
42	UPL amount after aggregate limit adjustments	979,573
43	Amount paid in April 2013 for 1st - 3rd quarters	734,680
44	SFY2013 4th quarter UPL adjustment	244,893
	Outpatient overpayment reduction	(102,877)
	UPL funds - payout or recovery	142,016
	Intergovernmental transfer amount	48,910
	Net funds amount	93,106

	Facility Name	Hughston Hospital Inc.
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	1,745,944
	payments for services	341,539
	annual covered charges	1,745,944
13	annual payments for services	341,539
14		
15	inpatient CCR	0.307063346
16		
17	annual cost of services	536,115
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	1,801,978
23	adjusted Medicaid payments for services	352,500
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	352,500
26	adjusted cost of services	553,321
27	•	
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30		DRG differential
31	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	439,611
33	,	,
	maximum annual payments	439,611
	facility specific UPL amount	87,111
36	, .	,
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(273)
	allocation of supplemental payments	(35,942)
	total aggregate limit adjustments	(36,215)
41		(53)==3)
	UPL amount after aggregate limit adjustments	50,896
	Amount paid in April 2013 for 1st - 3rd quarters	38,172
	SFY2013 4th quarter UPL adjustment	12,724
	Outpatient overpayment reduction	(813)
	UPL funds - payout or recovery	11,912
	Intergovernmental transfer amount	4,102
.,	Net funds amount	7,810
		7,310

	Facility Name	Irwin County Hospital
2	base period report period beginning date	12/01/09
3	base period report period ending date	11/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	1,681,143
	payments for services	876,777
	annual covered charges	1,681,143
13	annual payments for services	876,777
14		
15	inpatient CCR	0.541190805
16		
17	annual cost of services	909,819
18		
	<u>adjustment factor</u>	
20	inflation	1.022028
21		
22	adjusted annual charges	1,718,175
23	adjusted Medicaid payments for services	896,091
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	896,091
26	adjusted cost of services	929,860
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	1,117,537
33		
34	, ,	1,117,537
35	facility specific UPL amount	221,446
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(695)
39	allocation of supplemental payments	(91,367)
40	total aggregate limit adjustments	(92,062)
41		
42	UPL amount after aggregate limit adjustments	129,384
43	Amount paid in April 2013 for 1st - 3rd quarters	97,038
44	SFY2013 4th quarter UPL adjustment	32,346
45	Outpatient overpayment reduction	(11,078)
46	UPL funds - payout or recovery	21,269
47	Intergovernmental transfer amount	7,325
	Net funds amount	13,944

	Facility Name	Jefferson Hospital	
2	base period report period beginning date		01/01/10
3	base period report period ending date		12/31/10
4			
5	adjustment factor (if period not equal to 1 year)		1.0000
6 7	CAH status (1 = yes)		0
8	CATI Status (1 – yes)		U
9	Medicaid inpatient claims paid at amount > 0:		
10	covered charges		723,608
11			583,440
12	annual covered charges		723,608
13	annual payments for services		583,440
14			
15	inpatient CCR		0.468195012
16			
17	annual cost of services		338,790
18			
19	adjustment factor		
20	inflation		1.022716
21			
22	adjusted annual charges		740,045
23	adjusted Medicaid payments for services		596,693
	supplemental rate adjustment payments		0
	total adjusted Medicaid payments		596,693
26	adjusted cost of services		346,486
27			
28	other UPL calculation data		
29	provider category for UPL calculation	Non-State Govt.	
30	basis for UPL calculation	DRG differential	
31	DRG differential adjustment rate		1.247124
32	maximum annual payments (at DRG differential)		744,150
33			
34	maximum annual payments		744,150
35	facility specific UPL amount		147,457
36			
37	aggregate limit adjustments		(462)
	allocation of UPL amounts < 0		(463)
	allocation of supplemental payments		(60,840)
	total aggregate limit adjustments		(61,303)
41	LIDI amount after aggregate limit adjustments		96 15/
	UPL amount after aggregate limit adjustments Amount paid in April 2013 for 1st - 3rd quarters		86,154 64,616
	SFY2013 4th quarter UPL adjustment		21,538
	Outpatient overpayment reduction		(16,563)
	UPL funds - payout or recovery		4,976
	Intergovernmental transfer amount		1,714
7,	Net funds amount		3,262
	rect rands amount		3,202

	Facility Name	Mayo Clinic Health System in Waycross, Inc.
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8 9	Medicaid inpatient claims paid at amount > 0:	
_	covered charges	15,628,116
11	_	6,021,012
	annual covered charges	15,628,116
	-	
13 14	annual payments for services	6,021,012
	innationt CCD	0.44162747
	inpatient CCR	0.44163747
16	annual cost of comises	6 001 062
17	annual cost of services	6,901,962
18	adjustment factor	
19	adjustment factor inflation	1.022716
21	iiiiduoii	1.022/10
	adjusted annual charges	15,983,124
23		6,157,785
		365,779
24	• • • • • • • • • • • • • • • • • • • •	6,523,564
	total adjusted Medicaid payments	
26 27	adjusted cost of services	7,058,747
	other LIDL calculation data	
	other UPL calculation data	Non-State Govt.
29	provider category for UPL calculation	DRG differential
30		1.247124
	DRG differential adjustment rate	
32	maximum annual payments (at DRG differential)	7,679,521
33	maximum annual naumonts	7 670 521
	maximum annual payments	7,679,521 1,155,957
36	facility specific UPL amount	1,155,957
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(4 777)
	allocation of GFL amounts < 0	(4,777) (262,078)
	total aggregate limit adjustments	(266,855)
	total aggregate illilit adjustillerits	(200,833)
41	UPL amount after aggregate limit adjustments	889,102
	Amount paid in April 2013 for 1st - 3rd quarters	
		666,826 222,275
	SFY2013 4th quarter UPL adjustment	222,276
	Outpatient overpayment reduction	(212,945)
	UPL funds - payout or recovery	9,331
4/	Intergovernmental transfer amount Net funds amount	3,214
	iver runus amount	6,117

	Facility Name	Meadows Regional Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7	CAH status (1 = vos)	0
8	CAH status (1 = yes)	U
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	9,724,625
	payments for services	3,350,502
	annual covered charges	9,724,625
	annual payments for services	3,350,502
14	. ,	, ,
15	inpatient CCR	0.354797665
16	·	
17	annual cost of services	3,450,274
18		
19	adjustment factor	
20	-	1.032094
21		
22	adjusted annual charges	10,036,727
23	adjusted Medicaid payments for services	3,458,033
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	3,458,033
26	adjusted cost of services	3,561,007
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	4,312,596
33		
34	maximum annual payments	4,312,596
35	facility specific UPL amount	854,563
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(2,683)
39	allocation of supplemental payments	(352,586)
40	total aggregate limit adjustments	(355,269)
41		
	UPL amount after aggregate limit adjustments	499,294
	Amount paid in April 2013 for 1st - 3rd quarters	374,471
	SFY2013 4th quarter UPL adjustment	124,823
	Outpatient overpayment reduction	(71,544)
	UPL funds - payout or recovery	53,279
47	Intergovernmental transfer amount	18,349
	Net funds amount	34,930

	Facility Name	Medical Center of Central GA
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	143,064,917
11	payments for services	42,384,571
12	annual covered charges	143,064,917
13	annual payments for services	42,384,571
14		
15	inpatient CCR	0.317482879
16		
17	annual cost of services	45,420,662
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	146,019,923
23	adjusted Medicaid payments for services	43,260,024
24	supplemental rate adjustment payments	5,150,103
25	total adjusted Medicaid payments	48,410,127
26	adjusted cost of services	46,358,826
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	53,950,611
33		
34	maximum annual payments	53,950,611
35	facility specific UPL amount	5,540,484
36		
37	aggregate limit adjustments	
38		(33,562)
39	allocation of supplemental payments	739,244
40	total aggregate limit adjustments	705,682
41	,	·
	UPL amount after aggregate limit adjustments	6,246,166
	Amount paid in April 2013 for 1st - 3rd quarters	4,684,624
	SFY2013 4th quarter UPL adjustment	1,561,542
	Outpatient overpayment reduction	(676,251)
	UPL funds - payout or recovery	885,291
47		304,894
-	Net funds amount	580,397
		/ - - -

	Facility Name	Memorial Health Univ. Med Ctr
2	base period report period beginning date	01/01/10
3 4	base period report period ending date	12/31/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
_	covered charges	89,062,667
	payments for services	25,716,584
	annual covered charges	89,062,667
	annual payments for services	25,716,584
14	. ,	, ,
15	inpatient CCR	0.320662035
16	•	
17	annual cost of services	28,559,016
18		
19	adjustment factor	
20	-	1.022716
21		
22	adjusted annual charges	91,085,815
23	adjusted Medicaid payments for services	26,300,762
24	supplemental rate adjustment payments	4,533,108
25	total adjusted Medicaid payments	30,833,870
26	adjusted cost of services	29,207,763
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	32,800,310
33		
34	maximum annual payments	32,800,310
35	facility specific UPL amount	1,966,440
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(20,404)
	allocation of supplemental payments	1,851,441
40	total aggregate limit adjustments	1,831,037
41		
	UPL amount after aggregate limit adjustments	3,797,477
	Amount paid in April 2013 for 1st - 3rd quarters	2,848,108
	SFY2013 4th quarter UPL adjustment	949,369
	Outpatient overpayment reduction	(320,407)
	UPL funds - payout or recovery	628,962
47	Intergovernmental transfer amount	216,615
	Net funds amount	412,347

	Facility Name	Memorial Hospital - Bainbridge
2	base period report period beginning date	04/01/09
3 4	base period report period ending date	03/31/10
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7 8	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
_	covered charges	2,373,141
	payments for services	1,219,917
	annual covered charges	2,373,141
	annual payments for services	1,219,917
14	difficulty for services	1,213,317
	inpatient CCR	0.504696895
16	inputient con	0.30 1030033
	annual cost of services	1,197,717
18		_,,,,
	adjustment factor	
	inflation	1.045408
21		
22	adjusted annual charges	2,480,901
23	adjusted Medicaid payments for services	1,275,311
24	· ·	0
25	total adjusted Medicaid payments	1,275,311
	adjusted cost of services	1,252,103
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	1,590,471
33		
34	maximum annual payments	1,590,471
35	facility specific UPL amount	315,160
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(989)
	allocation of supplemental payments	(130,033)
	total aggregate limit adjustments	(131,022)
41		
	UPL amount after aggregate limit adjustments	184,138
	Amount paid in April 2013 for 1st - 3rd quarters	138,104
	SFY2013 4th quarter UPL adjustment	46,034
	Outpatient overpayment reduction	(19,546)
	UPL funds - payout or recovery	26,488
47	Intergovernmental transfer amount	9,122
	Net funds amount	17,366

	Facility Name	Murray Medical Center
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6	CALL status (1 - vos)	0
7 8	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	866,511
	payments for services	360,585
12	annual covered charges	866,511
	annual payments for services	360,585
14	. ,	,
15	inpatient CCR	0.366327348
16	•	
17	annual cost of services	317,427
18		,
19	adjustment factor	
	inflation	1.020655
21		
22	adjusted annual charges	884,409
23	adjusted Medicaid payments for services	368,033
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	368,033
26	adjusted cost of services	323,983
27	·	
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	458,983
33		
34	maximum annual payments	458,983
35	facility specific UPL amount	90,950
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(286)
39	allocation of supplemental payments	(37,525)
40	total aggregate limit adjustments	(37,811)
41		
42	UPL amount after aggregate limit adjustments	53,139
43	Amount paid in April 2013 for 1st - 3rd quarters	39,854
44	SFY2013 4th quarter UPL adjustment	13,285
45	Outpatient overpayment reduction	(26,793)
46	UPL funds - payout or recovery	(13,508)
47	Intergovernmental transfer amount	(4,652)
	Net funds amount	(8,856)

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(266,955)
375,176
281,382
93,794
(94,065)
(271)
(93)
(178)

	Facility Name	Northeast GA Medical Center
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	72,936,615
11	. ,	22,302,467
12	annual covered charges	72,936,615
13	annual payments for services	22,302,467
14		
15	inpatient CCR	0.365467487
16		
17	annual cost of services	26,655,961
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	74,443,121
23	adjusted Medicaid payments for services	22,763,124
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	22,763,124
	adjusted cost of services	27,206,540
27	,	,
	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	28,388,437
33	The annual payments (at 2110 anner entitle)	20,000, 10.
	maximum annual payments	28,388,437
	facility specific UPL amount	5,625,313
36	Tacincy specific of Lambane	3,023,313
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(17,660)
	allocation of supplemental payments	(2,320,963)
	total aggregate limit adjustments	(2,338,623)
41	total aggregate illilit adjustificitis	(2,336,023)
	UPL amount after aggregate limit adjustments	3,286,690
	Amount paid in April 2013 for 1st - 3rd quarters	2,465,018
	·	
	SFY2013 4th quarter UPL adjustment	821,672
	Outpatient overpayment reduction	(379,297)
	UPL funds - payout or recovery	442,376
4/	Intergovernmental transfer amount	152,354
	Net funds amount	290,022

	Facility Name	Northside - Cherokee
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	44 505 570
	covered charges	11,505,573
	payments for services	3,590,304
	annual covered charges	11,505,573
13	annual payments for services	3,590,304
14		
	inpatient CCR	0.3048298
16		
17	annual cost of services	3,507,242
18		
19	· 	
20	inflation	1.020655
21		
22	,	11,743,221
23	adjusted Medicaid payments for services	3,664,462
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	3,664,462
26	adjusted cost of services	3,579,684
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	4,570,038
33		
34	maximum annual payments	4,570,038
35	facility specific UPL amount	905,576
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(2,843)
39	allocation of supplemental payments	(373,634)
40	total aggregate limit adjustments	(376,477)
41		
42	UPL amount after aggregate limit adjustments	529,099
43	· · · · · · · · · · · · · · · · · · ·	396,824
44	SFY2013 4th quarter UPL adjustment	132,275
	Outpatient overpayment reduction	(99,112)
46	UPL funds - payout or recovery	33,164
47		11,422
	Net funds amount	21,742

	Facility Name	Northside - Forsyth
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		, ,
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7	CAH status (1 = yes)	0
8	CATIStatus (1 – yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	17,672,836
	payments for services	4,622,286
	annual covered charges	17,672,836
13	annual payments for services	4,622,286
14	. ,	, ,
15	inpatient CCR	0.971200002
16	·	
17	annual cost of services	17,163,858
18		, ,
19	adjustment factor	
20	-	1.020655
21		
22	adjusted annual charges	18,037,868
23	adjusted Medicaid payments for services	4,717,759
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	4,717,759
	adjusted cost of services	17,518,377
27	•	, ,
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	5,883,630
33	, , , , ,	, ,
34	maximum annual payments	5,883,630
35	facility specific UPL amount	1,165,871
36	, ,	, ,
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(3,660)
39	allocation of supplemental payments	(481,030)
	total aggregate limit adjustments	(484,690)
41	,	
42	UPL amount after aggregate limit adjustments	681,181
43	Amount paid in April 2013 for 1st - 3rd quarters	510,886
	SFY2013 4th quarter UPL adjustment	170,295
45	Outpatient overpayment reduction	(75,700)
	UPL funds - payout or recovery	94,595
47		32,579
	Net funds amount	62,016

	Facility Name	Northside Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	62,884,968
11	payments for services	17,145,850
12	annual covered charges	62,884,968
13	annual payments for services	17,145,850
14		
15	inpatient CCR	0.379592946
16		
17	annual cost of services	23,870,690
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	64,183,857
23	adjusted Medicaid payments for services	17,499,998
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	17,499,998
26	adjusted cost of services	24,363,739
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	21,824,666
33		
34	maximum annual payments	21,824,666
35	facility specific UPL amount	4,324,668
36	, .	, ,
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(13,577)
39		(1,784,327)
40	total aggregate limit adjustments	(1,797,904)
41	55 5	
	UPL amount after aggregate limit adjustments	2,526,764
43		1,895,073
	SFY2013 4th quarter UPL adjustment	631,691
	Outpatient overpayment reduction	(133,510)
46		498,182
47		171,574
•	Net funds amount	326,608
		==,000

	Facility Name	Oconee Regional Medical Center
	base period report period beginning date	10/01/09
3 4	base period report period ending date	09/30/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
	CAH status (1 = yes)	0
	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	7,859,396
11	payments for services	2,917,215
	annual covered charges	7,859,396
	annual payments for services	2,917,215
14	. ,	, ,
	inpatient CCR	0.441379011
16		2.460.072
	annual cost of services	3,468,972
18		
	adjustment factor	4.020655
	inflation	1.020655
21	adicated agreed shapes	0.024.722
	adjusted annual charges	8,021,732
	adjusted Medicaid payments for services	2,977,470
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	2,977,470
	adjusted cost of services	3,540,624
27	al appropriate	
	other UPL calculation data	New Chata Cast
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
33	maximum annual payments (at DRG differential)	3,713,274
	maximum annual payments	3,713,274
	facility specific UPL amount	735,804
36	• •	·
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(2,310)
39	allocation of supplemental payments	(303,587)
	total aggregate limit adjustments	(305,897)
41		
42	UPL amount after aggregate limit adjustments	429,907
	Amount paid in April 2013 for 1st - 3rd quarters	322,430
	SFY2013 4th quarter UPL adjustment	107,477
	Outpatient overpayment reduction	(57,127)
	UPL funds - payout or recovery	50,351
	Intergovernmental transfer amount	17,341
	Net funds amount	33,010

	Facility Name	Perry Hospital
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4	Section 1.	, - , -
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8 9	Madisaid innations slaims said at amount > 0.	
_	Medicaid inpatient claims paid at amount > 0: covered charges	1 442 107
11	payments for services	1,442,197 582,851
12		1,442,197
13	annual payments for services	582,851
14	annual payments for services	362,631
15	inpatient CCR	0.495857555
16	inpatient cen	0.493837333
17	annual cost of services	715,124
18	annual cost of services	713,124
19	adjustment factor	
20	inflation	1.022716
21	IIIIation	1.022/10
22	adjusted annual charges	1,474,958
23	adjusted Medicaid payments for services	596,091
24	• •	390,091
25	supplemental rate adjustment payments total adjusted Medicaid payments	· · · · · · · · · · · · · · · · · · ·
		596,091 731,360
26	adjusted cost of services	731,369
27	other LIDL coloulation data	
28	other UPL calculation data	Non State Court
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	743,399
33	mayimum annual naymants	742 200
34	maximum annual payments	743,399
35	facility specific UPL amount	147,308
36	aggragata limit adjustments	
37	aggregate limit adjustments	(462)
38		(462)
39	allocation of supplemental payments	(60,778)
40	total aggregate limit adjustments	(61,240)
41	LIDL amount often aggregate limit adjustments	96,069
	UPL amount after aggregate limit adjustments	86,068
43		64,551
44	SFY2013 4th quarter UPL adjustment	21,517
	Outpatient overpayment reduction	(13,052)
	UPL funds - payout or recovery	8,465
47	Intergovernmental transfer amount	2,915
	Net funds amount	5,550

	Facility Name	Phoebe Dorminy Medical Center
	base period report period beginning date	08/01/09
3 4	base period report period ending date	07/31/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	1,807,867
	payments for services	806,808
	annual covered charges	1,807,867
	annual payments for services	806,808
14	. ,	,
15	inpatient CCR	0.477869518
16	·	
17	annual cost of services	863,925
18		
19	adjustment factor	
	inflation	1.028252
21		
22	adjusted annual charges	1,858,943
23	adjusted Medicaid payments for services	829,602
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	829,602
26	adjusted cost of services	888,333
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	1,034,617
33		
34	maximum annual payments	1,034,617
35	facility specific UPL amount	205,015
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(644)
39	allocation of supplemental payments	(84,587)
40	total aggregate limit adjustments	(85,231)
41		
42	UPL amount after aggregate limit adjustments	119,784
43	Amount paid in April 2013 for 1st - 3rd quarters	89,838
44	SFY2013 4th quarter UPL adjustment	29,946
45	Outpatient overpayment reduction	(34,882)
46	UPL funds - payout or recovery	(4,936)
47	Intergovernmental transfer amount	(1,700)
	Net funds amount	(3,236)

	Facility Name	Phoebe Putney
2	base period report period beginning date	, 08/01/09
3	base period report period ending date	07/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	Madisaid innations slaims said at amount > 0.	
9	<u>Medicaid inpatient claims paid at amount > 0:</u> covered charges	61 400 000
	payments for services	61,490,989 17,620,681
	annual covered charges	61,490,989
	annual payments for services	17,620,681
14	annual payments for services	17,020,081
	inpatient CCR	0.353663555
16	inpatient cen	0.555005555
17	annual cost of services	21,747,122
18	difficult cost of services	21,747,122
	adjustment factor	
20	inflation	1.028252
21	imation	1.020232
	adjusted annual charges	63,228,232
23		18,118,500
24	· ·	2,670,393
	total adjusted Medicaid payments	20,788,893
	adjusted cost of services	22,361,522
27		,
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30		DRG differential
31	DRG differential adjustment rate	1.247124
32		22,596,015
33	, , , , ,	, ,
	maximum annual payments	22,596,015
	facility specific UPL amount	1,807,122
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(14,057)
39	allocation of supplemental payments	823,003
40	total aggregate limit adjustments	808,946
41		
42	UPL amount after aggregate limit adjustments	2,616,068
43	Amount paid in April 2013 for 1st - 3rd quarters	1,962,051
44	SFY2013 4th quarter UPL adjustment	654,017
45	Outpatient overpayment reduction	(755,728)
46	UPL funds - payout or recovery	(101,711)
47	Intergovernmental transfer amount	(35,029)
	Net funds amount	(66,682)

	Facility Name	Phoebe Sumter Medical Center, Inc.
2	base period report period beginning date	07/01/09
3	base period report period ending date	07/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	0.9217
7	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	5,596,006
	payments for services	1,944,081
	annual covered charges	5,157,935
	annual payments for services	1,791,893
14	annual payments for services	1,791,893
	inpatient CCR	0.501371306
16	inpatient cert	0.301371300
_	annual cost of services	2,586,041
18	annual cost of services	2,300,041
_	adjustment factor	
	inflation	1.028252
21	imation	1.020232
	adjusted annual charges	5,303,657
	adjusted Medicaid payments for services	1,842,518
	supplemental rate adjustment payments	1,042,510
	total adjusted Medicaid payments	1,842,518
	adjusted cost of services	2,659,102
27	adjusted cost of services	2,033,102
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30		DRG differential
	DRG differential adjustment rate	1.247124
32		2,297,848
33	and an array (at 2 nd an erentally	_,,
34	maximum annual payments	2,297,848
35	facility specific UPL amount	455,330
36	,	
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(1,429)
39		(187,866)
40	total aggregate limit adjustments	(189,295)
41	23 0 ,	, , , , , , , , , , , , , , , , , , ,
42	UPL amount after aggregate limit adjustments	266,035
	Amount paid in April 2013 for 1st - 3rd quarters	199,526
	SFY2013 4th quarter UPL adjustment	66,509
	Outpatient overpayment reduction	(91,003)
	UPL funds - payout or recovery	(24,494)
	Intergovernmental transfer amount	(8,436)
	Net funds amount	(16,058)

	Facility Name	South Georgia Medical Center
2	base period report period beginning date	10/01/09
3 4	base period report period ending date	09/30/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	Madical dispetions delines poid at appayers O	
9	Medicaid inpatient claims paid at amount > 0:	26.049.709
	covered charges payments for services	26,048,798 10,170,292
	annual covered charges	26,048,798
	_	10,170,292
14	annual payments for services	10,170,292
15	inpatient CCR	0.454821445
16	inpatient cen	0.434621443
17	annual cost of services	11,847,552
18	difficult cost of services	11,047,332
	adjustment factor	
	inflation	1.020655
21		11020033
	adjusted annual charges	26,586,836
23	adjusted Medicaid payments for services	10,380,359
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	10,380,359
	adjusted cost of services	12,092,263
27	,	,,,
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31		1.247124
32	maximum annual payments (at DRG differential)	12,945,594
33		
34	maximum annual payments	12,945,594
35	facility specific UPL amount	2,565,235
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(8,053)
39	allocation of supplemental payments	(1,058,398)
40	total aggregate limit adjustments	(1,066,451)
41		
42	UPL amount after aggregate limit adjustments	1,498,784
43	Amount paid in April 2013 for 1st - 3rd quarters	1,124,088
44	SFY2013 4th quarter UPL adjustment	374,696
45	Outpatient overpayment reduction	(648,030)
	UPL funds - payout or recovery	(273,334)
47	Intergovernmental transfer amount	(94,136)
	Net funds amount	(179,198)

	Facility Name	Southeast GA Health System - Brunswick
	base period report period beginning date	05/01/09
3 4	base period report period ending date	04/30/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7 8	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	26,214,482
	payments for services	7,727,637
	annual covered charges	26,214,482
13	annual payments for services	7,727,637
14		
15	inpatient CCR	0.377944477
16	•	
17	annual cost of services	9,907,619
18		
19	adjustment factor	
20	inflation	1.040932
21		
22	adjusted annual charges	27,287,493
23	adjusted Medicaid payments for services	8,043,945
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	8,043,945
26	adjusted cost of services	10,313,158
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	10,031,796
33		
34	maximum annual payments	10,031,796
35	facility specific UPL amount	1,987,851
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(6,241)
39	allocation of supplemental payments	(820,173)
40	total aggregate limit adjustments	(826,414)
41		
	UPL amount after aggregate limit adjustments	1,161,437
	Amount paid in April 2013 for 1st - 3rd quarters	871,078
	SFY2013 4th quarter UPL adjustment	290,359
	Outpatient overpayment reduction	(113,101)
	UPL funds - payout or recovery	177,259
47	Intergovernmental transfer amount	61,048
	Net funds amount	116,211

2 1,000	2	Facility Name base period report period beginning date	Southeast GA Health System - Camden 05/01/09
1.0000 6 6 7 7 6 7 7 6 7 7			
6 7 CAH status (1 = yes) 0 0 8			7,24,
7 CAH status (1 = yes) 0 8 Medicaid inpatient claims paid at amount > 0: 10 covered charges 1,853,620 11 payments for services 698,733 12 annual payments for services 698,733 14 Inpatient CCR 0.63050764 15 inpatient CCR 0.63050764 16 Inmual cost of services 1,168,722 18 Inmual cost of services 1,040932 18 Inflation 1.040932 21 adjusted Induction factor 1.040932 22 adjusted Medicaid payments for services 727,334 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 727,334 26 adjusted Cost of services 1,216,560 27 Total adjusted Medicaid payments 727,334 28 adjusted Medicaid payments 727,334 30 absis for UPL calculation data 900,005		adjustment factor (if period not equal to 1 year)	1.0000
Medicaid inpatient claims paid at amount > 0:	7	CAH status (1 = yes)	0
10 covered charges 1,853,620 11 payments for services 698,733 12 annual covered charges 1,853,620 13 annual payments for services 698,733 14 Inpatient CCR 0.63050764 15 inpatient CCR 0.63050764 16 Inition 1,168,722 18 adjustment factor 1,168,722 18 dijustment factor 1,040932 21 adjusted annual charges 1,929,492 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 0 26 adjusted cost of services 1,216,560 27 1,216,560 1,216,560 28 Otter UPL calculation data 1,247,124 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation POR differential 31 DRG differential adjustments 907,076 32<		Medicaid inpatient claims paid at amount > 0:	
11 payments for services 698,733 12 annual covered charges 1,853,620 13 annual payments for services 698,733 14 Inpatient CCR 0.63050764 16 Inpatient CCR 0.63050764 17 annual cost of services 1,168,722 18 adjustment factor 1,040932 20 inflation 1,040932 21 adjusted annual charges 1,929,492 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 727,334 25 total adjusted Medicaid payments 727,334 26 adjusted Cost of services 1,216,560 27 inter UPL calculation data 727,334 28 provider category for UPL calculation Non-State Govt. 29 provider Category for UPL calculation PARC Jule 30 basis for UPL calculation PARC Jule 40 basis for UPL amount after Apprents (at DRG differential) 907,076 51 facility specif			1,853,620
13 annual payments for services 698,733 14 inpatient CCR 0.63050764 15 inpatient CCR 0.63050764 16 annual cost of services 1,168,722 18 adjustment factor 1.040932 21 dijusted annual charges 1,929,492 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 727,334 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 dijusted cost of services 1,216,560 27 adjusted cost of services 1,216,560 28 Other UPL calculation data 10 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation PRG differential 31 DRG differential adjustment rate 1,247124 32 maximum annual payments (at DRG differential) 907,076 35 facility specific UPL amount (564) 36 allocation of UPL amounts < 0		=	
14 Injantient CCR 0.63050764 15 injantient CCR 0.63050764 16 annual cost of services 1,168,722 18 adjustment factor 1.040932 20 inflation 1.040932 21 adjusted Medicaid payments for services 727,334 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 Other UPL calculation data 727,334 28 other UPL calculation Data 727,334 29 provider category for UPL calculation DRG differential 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 907,076 34 maximum annual payments 907,076 35 facility specific UPL amount < 0	12	annual covered charges	1,853,620
15 inpatient CCR 0.63050764 16 annual cost of services 1,168,722 17 annual cost of services 1,168,722 18 adjustment factor 1.040932 21 dijusted annual charges 1,929,492 22 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 other UPL calculation data 727,334 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 907,076 33 facility specific UPL amount 907,076 34 maximum annual payments 907,076 35 facility specific UPL amounts < 0	13	annual payments for services	698,733
16 1,168,722 17 annual cost of services 1,168,722 18 adjustment factor 20 inflation 1.040932 21 adjusted annual charges 1,929,492 22 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 total adjusted Cost of services 1,216,560 28 total adjusted Cost of services 1,216,560 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation data 1247124 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 179,742 34 maximum annual payments 907,076 35 facility specific UPL amounts < 0	14		
17 annual cost of services 1,168,722 18 adjustment factor 20 inflation 1.040932 21 1 22 adjusted annual charges 1,929,492 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 27,334 28 other UPL calculation data Provider category for UPL calculation 29 provider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 907,076 33 facility specific UPL amount 179,742 34 maximum annual payments 907,076 35 facility specific UPL amounts < 0	15	inpatient CCR	0.63050764
18 adjustment factor 20 inflation 1.040932 21 adjusted annual charges 1,929,492 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 total adjusted cost of services 1,216,560 28 ther UPL calculation data Provider category for UPL calculation 39 basis for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1.247124 32 maximum annual payments (at DRG differential) 907,076 35 facility specific UPL amount 179,742 36 aggregate limit adjustments (564) 37 aggregate limit adjustments (74,160) 38 allocation of UPL amounts < 0	16		
19 adjustment factor 20 inflation 1.040932 21 1.040932 22 adjusted annual charges 1,929,492 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 0 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 Total adjusted Cost of Services 1,216,560 28 Other UPL calculation data DRG differential 30 basis for UPL calculation full adjustment rate 1,247124 31 DRG differential adjustment rate 1,247124 32 maximum annual payments (at DRG differential) 907,076 33 facility specific UPL amounts < 0	17	annual cost of services	1,168,722
20 inflation 1.040932 21 adjusted annual charges 1,929,492 23 adjusted Medicaid payments for services 727,334 24 supplemental rate adjustment payments 727,334 25 total adjusted Medicaid payments 727,334 26 adjusted cost of services 1,216,560 27 rovider category for UPL calculation Non-State Govt. 30 basis for UPL calculation DRG differential 31 DRG differential adjustment rate 1,247124 32 maximum annual payments (at DRG differential) 907,076 33 facility specific UPL amount 179,742 36 aggregate limit adjustments 907,076 36 allocation of UPL amounts < 0			
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22adjusted annual charges1,929,49223adjusted Medicaid payments for services727,33424supplemental rate adjustment payments025total adjusted Medicaid payments727,33426adjusted cost of services1,216,56027tother UPL calculation data829provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1,24712432maximum annual payments (at DRG differential)907,07633facility specific UPL amount179,74235facility specific UPL amount179,74236allocation of UPL amounts < 0		inflation	1.040932
23adjusted Medicaid payments for services727,33424supplemental rate adjustment payments025total adjusted Medicaid payments727,33426adjusted cost of services1,216,5602728other UPL calculation data29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1,24712432maximum annual payments (at DRG differential)907,07635facility specific UPL amount179,7423637aggregate limit adjustments907,07635facility specific UPL amounts < 0			
24supplemental rate adjustment payments025total adjusted Medicaid payments727,33426adjusted cost of services1,216,5602728other UPL calculation data29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)907,07633facility specific UPL amount179,74236aggregate limit adjustments907,07635facility specific UPL amounts < 0			
25total adjusted Medicaid payments727,33426adjusted cost of services1,216,56027			
26 adjusted cost of services 27 cother UPL calculation data 28 provider category for UPL calculation 29 provider category for UPL calculation 30 basis for UPL calculation 31 DRG differential adjustment rate 32 maximum annual payments (at DRG differential) 33 maximum annual payments 34 maximum annual payments 35 facility specific UPL amount 36 aggregate limit adjustments 38 allocation of UPL amounts < 0 39 allocation of supplemental payments 40 total aggregate limit adjustments 41 UPL amount after aggregate limit adjustments 42 UPL amount after aggregate limit adjustments 43 Amount paid in April 2013 for 1st - 3rd quarters 44 SFY2013 4th quarter UPL adjustment 45 Outpatient overpayment reduction 46 UPL funds - payout or recovery 47 (5,801) 48 Intergovernmental transfer amount 49 Intergovernmental transfer amount 40 Intergovernmental transfer amount 41 (1,998)			
27other UPL calculation data28other UPL calculation data29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)907,07633facility specific UPL amount179,74236aggregate limit adjustments179,74238allocation of UPL amounts < 0			
28other UPL calculation data29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)907,07633#*** a maximum annual payments907,07635facility specific UPL amount179,74236#*** a sillocation of UPL amounts(564)39allocation of Supplemental payments(74,160)40total aggregate limit adjustments(74,724)41UPL amount after aggregate limit adjustments105,01843Amount paid in April 2013 for 1st - 3rd quarters78,76444\$FY2013 4th quarter UPL adjustment26,25445Outpatient overpayment reduction(32,055)46UPL funds - payout or recovery(5,801)47Intergovernmental transfer amount(1,998)		adjusted cost of services	1,216,560
29provider category for UPL calculationNon-State Govt.30basis for UPL calculationDRG differential31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)907,07633maximum annual payments907,07635facility specific UPL amount179,74236aggregate limit adjustments(564)39allocation of UPL amounts < 0		ath an LIDL and a dation date	
basis for UPL calculation DRG differential DRG differential adjustment rate 1.247124 maximum annual payments (at DRG differential) 907,076 maximum annual payments 907,076 facility specific UPL amount 179,742 maximum annual payments 907,076 facility specific UPL amount 179,742 maximum annual payments 907,076 facility specific UPL amount 179,742 maximum annual payments 907,076 facility specific UPL amount 179,742 maximum annual payments 907,076 facility specific UPL amount 179,742 UPL amount adjustments 907,076 maximum annual payments 179,742 UPL amount of UPL amounts < 0 (564) Maximum annual payments 907,076 maximum annual payments 907,			New State Court
31DRG differential adjustment rate1.24712432maximum annual payments (at DRG differential)907,07633maximum annual payments907,07635facility specific UPL amount179,74236aggregate limit adjustments38allocation of UPL amounts < 0			
32maximum annual payments (at DRG differential)907,07633maximum annual payments907,07635facility specific UPL amount179,74236aggregate limit adjustments37aggregate limit adjustments(564)39allocation of UPL amounts < 0			
maximum annual payments 907,076 facility specific UPL amount 179,742 facility specific UPL amount 179,742 general aggregate limit adjustments allocation of UPL amounts < 0 (564) allocation of supplemental payments (74,160) total aggregate limit adjustments (74,724) UPL amount after aggregate limit adjustments 105,018 Amount paid in April 2013 for 1st - 3rd quarters 78,764 SFY2013 4th quarter UPL adjustment 26,254 UPL funds - payout or recovery (5,801) Intergovernmental transfer amount (1,998)			
34maximum annual payments907,07635facility specific UPL amount179,74236aggregate limit adjustments38allocation of UPL amounts < 0		maximum annuai payments (at DKG umerential)	907,076
35facility specific UPL amount179,74236aggregate limit adjustments37aggregate limit adjustments(564)39allocation of supplemental payments(74,160)40total aggregate limit adjustments(74,724)41UPL amount after aggregate limit adjustments105,01843Amount paid in April 2013 for 1st - 3rd quarters78,76444SFY2013 4th quarter UPL adjustment26,25445Outpatient overpayment reduction(32,055)46UPL funds - payout or recovery(5,801)47Intergovernmental transfer amount(1,998)		maximum annual navments	907.076
3638 aggregate limit adjustments38 allocation of UPL amounts < 0(564)39 allocation of supplemental payments(74,160)40 total aggregate limit adjustments(74,724)41UPL amount after aggregate limit adjustments105,01843 Amount paid in April 2013 for 1st - 3rd quarters78,76444 SFY2013 4th quarter UPL adjustment26,25445 Outpatient overpayment reduction(32,055)46 UPL funds - payout or recovery(5,801)47 Intergovernmental transfer amount(1,998)			
37aggregate limit adjustments38allocation of UPL amounts < 0		racinty specific of Lamount	173,742
38allocation of UPL amounts < 0(564)39allocation of supplemental payments(74,160)40total aggregate limit adjustments(74,724)41UPL amount after aggregate limit adjustments105,01843Amount paid in April 2013 for 1st - 3rd quarters78,76444SFY2013 4th quarter UPL adjustment26,25445Outpatient overpayment reduction(32,055)46UPL funds - payout or recovery(5,801)47Intergovernmental transfer amount(1,998)		aggregate limit adjustments	
39 allocation of supplemental payments(74,160)40 total aggregate limit adjustments(74,724)41UPL amount after aggregate limit adjustments105,01843 Amount paid in April 2013 for 1st - 3rd quarters78,76444 SFY2013 4th quarter UPL adjustment26,25445 Outpatient overpayment reduction(32,055)46 UPL funds - payout or recovery(5,801)47 Intergovernmental transfer amount(1,998)			(564)
40total aggregate limit adjustments(74,724)4142UPL amount after aggregate limit adjustments105,01843Amount paid in April 2013 for 1st - 3rd quarters78,76444SFY2013 4th quarter UPL adjustment26,25445Outpatient overpayment reduction(32,055)46UPL funds - payout or recovery(5,801)47Intergovernmental transfer amount(1,998)			
41 42 UPL amount after aggregate limit adjustments 43 Amount paid in April 2013 for 1st - 3rd quarters 44 SFY2013 4th quarter UPL adjustment 45 Outpatient overpayment reduction 46 UPL funds - payout or recovery 47 Intergovernmental transfer amount 48 (1,998)			
Amount paid in April 2013 for 1st - 3rd quarters 78,764 SFY2013 4th quarter UPL adjustment 26,254 Outpatient overpayment reduction (32,055) UPL funds - payout or recovery Intergovernmental transfer amount (1,998)			(
Amount paid in April 2013 for 1st - 3rd quarters 78,764 SFY2013 4th quarter UPL adjustment 26,254 Outpatient overpayment reduction (32,055) UPL funds - payout or recovery Intergovernmental transfer amount (1,998)		UPL amount after aggregate limit adjustments	105.018
44 SFY2013 4th quarter UPL adjustment 26,254 45 Outpatient overpayment reduction (32,055) 46 UPL funds - payout or recovery (5,801) 47 Intergovernmental transfer amount (1,998)		== = = = = = = = = = = = = = = = = = = =	
45 Outpatient overpayment reduction (32,055) 46 UPL funds - payout or recovery (5,801) 47 Intergovernmental transfer amount (1,998)		· · · · · · · · · · · · · · · · · · ·	
46 UPL funds - payout or recovery (5,801) 47 Intergovernmental transfer amount (1,998)		· · · · · · · · · · · · · · · · · · ·	
	46	UPL funds - payout or recovery	
Net funds amount (3,803)	47	Intergovernmental transfer amount	(1,998)
		Net funds amount	(3,803)

	Facility Name	Southern Regional Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6	2011	
7	CAH status (1 = yes)	0
8 9	Modicaid innationt claims naid at amount > 0:	
	Medicaid inpatient claims paid at amount > 0: covered charges	52,119,772
	payments for services	15,220,342
	annual covered charges	52,119,772
	annual payments for services	15,220,342
14	aimuai payments for services	13,220,342
	inpatient CCR	0.354744172
16	inputient con	0.334744172
	annual cost of services	18,489,185
18		25, .55,255
	adjustment factor	
	inflation	1.032094
21		
22	adjusted annual charges	53,792,504
23	adjusted Medicaid payments for services	15,708,824
24	supplemental rate adjustment payments	7,474,638
25	total adjusted Medicaid payments	23,183,462
26	adjusted cost of services	19,082,577
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	19,590,850
33		
	maximum annual payments	19,590,850
	facility specific UPL amount	(3,592,612)
36		
37	aggregate limit adjustments	(42.407)
	allocation of UPL amounts < 0	(12,187)
	allocation of supplemental payments	5,872,942
	total aggregate limit adjustments	5,860,755
41	LIDI amount after aggregate limit adjustments	2 269 142
	UPL amount after aggregate limit adjustments Amount paid in April 2013 for 1st - 3rd quarters	2,268,143 1,701,107
	SFY2013 4th quarter UPL adjustment	56 7,03 6
	Outpatient overpayment reduction	(275,415)
	UPL funds - payout or recovery	291,621
	Intergovernmental transfer amount	100,434
7,	Net funds amount	191,187
	net rands amount	151,107

	Facility Name	Stephens County Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7	CAH status (1 = yes)	0
8	CATT Status (1 - yes)	U
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	3,926,964
	payments for services	1,391,774
	annual covered charges	3,926,964
	annual payments for services	1,391,774
14		_,,
15	inpatient CCR	0.481816319
16	•	
17	annual cost of services	1,892,075
18		, ,
19	adjustment factor	
20	·	1.020655
21		
22	adjusted annual charges	4,008,075
23	adjusted Medicaid payments for services	1,420,521
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	1,420,521
26	adjusted cost of services	1,931,156
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	1,771,566
33		
34	maximum annual payments	1,771,566
35	facility specific UPL amount	351,045
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(1,102)
	allocation of supplemental payments	(144,839)
40	total aggregate limit adjustments	(145,941)
41		
	UPL amount after aggregate limit adjustments	205,104
	Amount paid in April 2013 for 1st - 3rd quarters	153,828
	SFY2013 4th quarter UPL adjustment	51,276
	Outpatient overpayment reduction	(46,998)
	UPL funds - payout or recovery	4,279
47	Intergovernmental transfer amount	1,474
	Net funds amount	2,805

	Facility Name	Tanner Med Ctr - Carrollton
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	12,506,283
11	payments for services	4,223,137
12	annual covered charges	12,506,283
13	annual payments for services	4,223,137
14		
15	inpatient CCR	0.416279769
16		
17	annual cost of services	5,206,113
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	12,907,660
23	adjusted Medicaid payments for services	4,358,674
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	4,358,674
26	adjusted cost of services	5,373,198
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	5,435,807
33		
34	maximum annual payments	5,435,807
35	facility specific UPL amount	1,077,133
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(3,382)
39	allocation of supplemental payments	(444,417)
40	total aggregate limit adjustments	(447,799)
41		
	UPL amount after aggregate limit adjustments	629,334
	Amount paid in April 2013 for 1st - 3rd quarters	472,001
	SFY2013 4th quarter UPL adjustment	157,333
45	Outpatient overpayment reduction	(177,205)
46	UPL funds - payout or recovery	(19,872)
47	Intergovernmental transfer amount	(6,844)
	Net funds amount	(13,028)

	Facility Name	Tanner Med Ctr - Villa Rica
2	base period report period beginning date	07/01/09
	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
	Medicaid inpatient claims paid at amount > 0:	
	covered charges	9,062,287
	payments for services	5,438,329
	annual covered charges	9,062,287
13	annual payments for services	5,438,329
14		
15	inpatient CCR	0.615133965
16		
17	annual cost of services	5,574,521
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	9,353,132
23	adjusted Medicaid payments for services	5,612,867
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	5,612,867
26	adjusted cost of services	5,753,430
27	•	
28	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	6,999,941
33	, , , , ,	, ,
34	maximum annual payments	6,999,941
	facility specific UPL amount	1,387,074
36	, .	, ,
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(4,355)
	allocation of supplemental payments	(572,296)
	total aggregate limit adjustments	(576,651)
41		(0.0,000)
	UPL amount after aggregate limit adjustments	810,423
	Amount paid in April 2013 for 1st - 3rd quarters	607,817
	SFY2013 4th quarter UPL adjustment	202,606
	Outpatient overpayment reduction	(106,184)
	UPL funds - payout or recovery	96,422
	Intergovernmental transfer amount	33,208
7/	Net funds amount	63,214
	rectionas amount	03,214

	Facility Name	The Medical Center
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8 9	Medicaid inpatient claims paid at amount > 0:	
_	covered charges	49,262,553
	payments for services	15,406,688
	annual covered charges	49,262,553
13	annual payments for services	15,406,688
14	annual payments for services	13,400,088
15	inpatient CCR	0.39898962
16	inpatient cen	0.53636302
17	annual cost of services	19,655,247
18	difficult cost of services	13,033,247
	adjustment factor	
20	inflation	1.032094
21		1.03203 1
	adjusted annual charges	50,843,585
23	adjusted Medicaid payments for services	15,901,150
24	supplemental rate adjustment payments	3,997,248
	total adjusted Medicaid payments	19,898,398
26	adjusted cost of services	20,286,062
27	,	-,,
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	19,830,705
33		
34	maximum annual payments	19,830,705
35	facility specific UPL amount	(67,693)
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(12,336)
39	allocation of supplemental payments	2,375,942
40	total aggregate limit adjustments	2,363,606
41		
42	UPL amount after aggregate limit adjustments	2,295,913
43	Amount paid in April 2013 for 1st - 3rd quarters	1,721,935
44	SFY2013 4th quarter UPL adjustment	573,978
	Outpatient overpayment reduction	(481,107)
46	UPL funds - payout or recovery	92,871
47	· ·	31,985
	Net funds amount	60,886

	Facility Name	Tift Regional Medical Center
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	Similated (1 yes)	· ·
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	19,516,877
11	payments for services	13,282,614
	annual covered charges	19,516,877
13	annual payments for services	13,282,614
14		
15	inpatient CCR	0.359520085
16		
17	annual cost of services	7,016,709
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	19,919,998
23	adjusted Medicaid payments for services	13,556,966
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	13,556,966
26	adjusted cost of services	7,161,639
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	16,907,217
33		
34	maximum annual payments	16,907,217
35	facility specific UPL amount	3,350,251
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(10,518)
39	allocation of supplemental payments	(1,382,289)
40	total aggregate limit adjustments	(1,392,807)
41		
42	UPL amount after aggregate limit adjustments	1,957,444
43	Amount paid in April 2013 for 1st - 3rd quarters	1,468,083
44	SFY2013 4th quarter UPL adjustment	489,361
45	Outpatient overpayment reduction	(203,635)
46	UPL funds - payout or recovery	285,727
47	Intergovernmental transfer amount	98,404
	Net funds amount	187,323

	Facility Name	Union General Hospital
2	base period report period beginning date	05/01/09
3	base period report period ending date	04/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	CATT Status (1 – yes)	Ü
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	555,182
	payments for services	372,550
	annual covered charges	555,182
	annual payments for services	372,550
14	difficulty for services	372,330
	inpatient CCR	0.5792248
16	inputient cen	0.5752240
17	annual cost of services	321,575
18	difficult cost of services	321,373
	adjustment factor	
	inflation	1.040932
21	macon	1.040332
	adjusted annual charges	577,907
23	adjusted Medicaid payments for services	387,799
24		0
	total adjusted Medicaid payments	387,799
26	adjusted cost of services	334,738
27	adjusted cost of services	334,738
	other UPL calculation data	
		Non-State Govt.
29	provider category for UPL calculation	DRG differential
30	basis for UPL calculation DRG differential adjustment rate	
		1.247124
32 33	maximum annual payments (at DRG differential)	483,633
	maximum annual nayments	483,633
	maximum annual payments	
36	facility specific UPL amount	95,834
	aggregate limit adjustments	
	aggregate limit adjustments allocation of UPL amounts < 0	(301)
	allocation of supplemental payments	(301)
	total aggregate limit adjustments	(39,842)
41	total aggregate illilit adjustifierits	(39,842)
	LIDI amount after aggregate limit adjustments	55,992
	UPL amount after aggregate limit adjustments Amount paid in April 2013 for 1st - 3rd quarters	
	· · · · · · · · · · · · · · · · · · ·	41,994
	SFY2013 4th quarter UPL adjustment	13,998
	Outpatient overpayment reduction	(14,278)
	UPL funds - payout or recovery	(280)
4/	Intergovernmental transfer amount	(96)
	Net funds amount	(184)

	Facility Name	University Hospital	
2	base period report period beginning date	, ,	01/01/10
3	base period report period ending date		12/31/10
4			
5 6	adjustment factor (if period not equal to 1 year)		1.0000
7	CAH status (1 = yes)		0
8			
9	Medicaid inpatient claims paid at amount > 0:		
10	covered charges		45,406,287
11	payments for services		13,875,846
12	annual covered charges		45,406,287
13	annual payments for services		13,875,846
14			
15	inpatient CCR		0.391313856
16			
17	annual cost of services		17,768,109
18			
19	adjustment factor		
20	inflation		1.022716
21			
22	adjusted annual charges		46,437,736
23	adjusted Medicaid payments for services		14,191,050
24	supplemental rate adjustment payments		0
25	total adjusted Medicaid payments		14,191,050
26	adjusted cost of services		18,171,729
27			
28	other UPL calculation data		
29	provider category for UPL calculation	Non-State Govt.	
30		DRG differential	
31	DRG differential adjustment rate		1.247124
32	maximum annual payments (at DRG differential)		17,697,998
33			
34	maximum annual payments		17,697,998
35	facility specific UPL amount		3,506,948
36			
37	aggregate limit adjustments		
38	allocation of UPL amounts < 0		(11,010)
39	allocation of supplemental payments		(1,446,941)
40	total aggregate limit adjustments		(1,457,951)
41			
42	UPL amount after aggregate limit adjustments		2,048,997
43	Amount paid in April 2013 for 1st - 3rd quarters		1,536,748
44	SFY2013 4th quarter UPL adjustment		512,249
45	Outpatient overpayment reduction		(231,337)
46	UPL funds - payout or recovery		280,912
47	Intergovernmental transfer amount		96,746
	Net funds amount		184,166

	Facility Name	University Hospital McDuffie
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	4.470.464
	covered charges	1,173,164
	payments for services	499,044
	annual covered charges	1,173,164
	annual payments for services	499,044
14		
15	inpatient CCR	0.457690483
16		
17	annual cost of services	536,946
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	1,197,396
23	adjusted Medicaid payments for services	509,352
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	509,352
	adjusted cost of services	548,037
27	•	,
28	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	635,225
33	, , , , , , , , , , , , , , , , , , , ,	333,223
	maximum annual payments	635,225
	facility specific UPL amount	125,873
36		120,070
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(395)
	allocation of supplemental payments	(51,934)
	total aggregate limit adjustments	(52,329)
41	to the most open to milit any astiments	(32,323)
	UPL amount after aggregate limit adjustments	73,544
	Amount paid in April 2013 for 1st - 3rd quarters	55,158
	SFY2013 4th quarter UPL adjustment	18,386
	Outpatient overpayment reduction	(28,911)
	·	• • •
	UPL funds - payout or recovery	(10,525)
47	Intergovernmental transfer amount Net funds amount	(3,625)
	inet fullus afficult	(6,900)

	Facility Name	Upson Regional Medical Center
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	7-17	
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	8,375,699
11	payments for services	3,333,521
12	annual covered charges	8,375,699
13	annual payments for services	3,333,521
14		
15	inpatient CCR	0.372388256
16		
17	annual cost of services	3,119,012
18		
19	adjustment factor	
20		1.022716
21		
22	adjusted annual charges	8,565,961
23	adjusted Medicaid payments for services	3,409,245
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	3,409,245
	adjusted cost of services	3,189,863
27	•	, ,
28	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	4,251,751
33	, , , , , , , , , , , , , , , , , , , ,	, ,
	maximum annual payments	4,251,751
	facility specific UPL amount	842,506
36	, ,	•
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(2,645)
	allocation of supplemental payments	(347,612)
	total aggregate limit adjustments	(350,257)
41	55 5	, , ,
	UPL amount after aggregate limit adjustments	492,249
	Amount paid in April 2013 for 1st - 3rd quarters	369,187
	SFY2013 4th quarter UPL adjustment	123,062
	Outpatient overpayment reduction	(79,052)
	UPL funds - payout or recovery	44,010
	Intergovernmental transfer amount	15,157
-	Net funds amount	28,853
		-/

	Facility Name	Washington County Regional Medical Center
2	base period report period beginning date	09/01/09
3	base period report period ending date	08/31/10
4	and because observe and and	,,
5	adjustment factor (if period not equal to 1 year)	1.0000
6	O	
7	CAH status (1 = yes)	0
8	Madical dispetient delegancid at any south O	
9	Medicaid inpatient claims paid at amount > 0:	2.525.244
	covered charges	2,636,211
	payments for services	1,443,040
	annual covered charges	2,636,211
	annual payments for services	1,443,040
14		
15	inpatient CCR	0.468245333
16		
17	annual cost of services	1,234,393
18		
	<u>adjustment factor</u>	
20	inflation	1.024440
21		
22	adjusted annual charges	2,700,640
23	adjusted Medicaid payments for services	1,478,308
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	1,478,308
26	adjusted cost of services	1,264,562
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	1,843,633
33		
34	maximum annual payments	1,843,633
35	facility specific UPL amount	365,325
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(1,147)
39	allocation of supplemental payments	(150,730)
40	total aggregate limit adjustments	(151,877)
41		
42	UPL amount after aggregate limit adjustments	213,448
	Amount paid in April 2013 for 1st - 3rd quarters	160,086
	SFY2013 4th quarter UPL adjustment	53,362
	Outpatient overpayment reduction	(16,659)
	UPL funds - payout or recovery	36,703
	Intergovernmental transfer amount	12,641
	Net funds amount	24,062
		•

	Facility Name	Wayne Memorial Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4 5	adjustment factor (if period not equal to 1 year)	1.0000
6	adjustment factor (ii period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	4,840,526
11	payments for services	1,563,340
12	annual covered charges	4,840,526
13	annual payments for services	1,563,340
14		
15	inpatient CCR	0.44241158
16		
17	annual cost of services	2,141,505
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	4,995,878
23	adjusted Medicaid payments for services	1,613,514
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	1,613,514
26	adjusted cost of services	2,210,234
27	·	
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	2,012,252
33	, , , , , , , , , , , , , , , , , , , ,	, ,
34	maximum annual payments	2,012,252
35	facility specific UPL amount	398,738
36	, .	,
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(1,252)
	allocation of supplemental payments	(164,516)
	total aggregate limit adjustments	(165,768)
41		(===,:==,
	UPL amount after aggregate limit adjustments	232,970
	Amount paid in April 2013 for 1st - 3rd quarters	174,728
	SFY2013 4th quarter UPL adjustment	58,242
	Outpatient overpayment reduction	(52,100)
	UPL funds - payout or recovery	6,143
	Intergovernmental transfer amount	2,115
7,	Net funds amount	4,028
	Tree range unioune	4,028

	Facility Name	WellStar Cobb Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		_
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	63,611,418
	payments for services	17,534,049
	annual covered charges	63,611,418
	annual payments for services	17,534,049
14		
	inpatient CCR	0.373558037
16		
17	annual cost of services	23,762,556
18		
	<u>adjustment factor</u>	
20	inflation	1.032094
21		
22	adjusted annual charges	65,652,963
23	, ,	18,096,787
24	, , ,	0
	total adjusted Medicaid payments	18,096,787
	adjusted cost of services	24,525,191
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30		DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	22,568,936
33		
	maximum annual payments	22,568,936
	facility specific UPL amount	4,472,149
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(14,040)
	allocation of supplemental payments	(1,845,176)
	total aggregate limit adjustments	(1,859,216)
41		
	UPL amount after aggregate limit adjustments	2,612,933
	Amount paid in April 2013 for 1st - 3rd quarters	1,959,700
	SFY2013 4th quarter UPL adjustment	653,233
	Outpatient overpayment reduction	(204,697)
	UPL funds - payout or recovery	448,537
47	Intergovernmental transfer amount	154,476
	Net funds amount	294,061

	Facility Name	Wellstar Douglas Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7	CAH status (1 - vos)	0
8	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	13,763,828
	payments for services	4,025,608
	annual covered charges	13,763,828
	annual payments for services	4,025,608
14	aa. paymente rer eer mees	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	inpatient CCR	0.384084334
16	F	
17	annual cost of services	5,286,471
18		, ,
19	adjustment factor	
	inflation	1.032094
21		
22	adjusted annual charges	14,205,564
23	adjusted Medicaid payments for services	4,154,806
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	4,154,806
26	adjusted cost of services	5,456,135
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	5,181,558
33		
	maximum annual payments	5,181,558
	facility specific UPL amount	1,026,752
36		
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(3,223)
	allocation of supplemental payments	(423,631)
	total aggregate limit adjustments	(426,854)
41		
	UPL amount after aggregate limit adjustments	599,898
	Amount paid in April 2013 for 1st - 3rd quarters	449,924
	SFY2013 4th quarter UPL adjustment	149,974
	Outpatient overpayment reduction	(55,946)
	UPL funds - payout or recovery	94,028
47	Intergovernmental transfer amount	32,383
	Net funds amount	61,645

	Facility Name	WellStar Kennestone Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8 9	Medicaid innationt claims naid at amount > 0:	
	<u>Medicaid inpatient claims paid at amount > 0:</u> covered charges	78,121,177
	payments for services	22,007,549
	annual covered charges	78,121,177
13	annual payments for services	22,007,549
14	aimuai payments for services	22,007,349
	inpatient CCR	0.370917031
16	inpatient con	0.370917031
17	annual cost of services	28,976,475
18	difficult cost of services	20,370,473
	adjustment factor	
20	-	1.032094
21	imation	1.032034
	adjusted annual charges	80,628,398
23	adjusted Medicaid payments for services	22,713,859
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	22,713,859
	adjusted cost of services	29,906,446
27	adjusted cost of services	23,300,110
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	28,326,997
33	The amount of the control of the con	
34	maximum annual payments	28,326,997
35	facility specific UPL amount	5,613,138
36	Takina, aparama and amarama	3,3-3,-33
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(17,622)
	allocation of supplemental payments	(2,315,940)
	total aggregate limit adjustments	(2,333,562)
41	,	, , , ,
	UPL amount after aggregate limit adjustments	3,279,576
	Amount paid in April 2013 for 1st - 3rd quarters	2,459,682
	SFY2013 4th quarter UPL adjustment	819,894
	Outpatient overpayment reduction	(275,527)
	UPL funds - payout or recovery	544,368
47		187,480
	Net funds amount	356,888
		,

	Facility Name	WellStar Paulding Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8	7-1	
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	2,420,921
11	payments for services	740,240
12	annual covered charges	2,420,921
13	annual payments for services	740,240
14	. ,	
15	inpatient CCR	0.402234989
16	·	
17	annual cost of services	973,779
18		·
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	2,498,618
23	adjusted Medicaid payments for services	763,997
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	763,997
26	adjusted cost of services	1,005,031
27	•	
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	952,799
33		
34	maximum annual payments	952,799
35	facility specific UPL amount	188,802
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(593)
39	allocation of supplemental payments	(77,898)
40	total aggregate limit adjustments	(78,491)
41		
42	UPL amount after aggregate limit adjustments	110,311
	Amount paid in April 2013 for 1st - 3rd quarters	82,733
	SFY2013 4th quarter UPL adjustment	27,578
45		(31,634)
46	UPL funds - payout or recovery	(4,056)
47	Intergovernmental transfer amount	(1,397)
	Net funds amount	(2,659)

	Facility Name	WellStar Windy Hill Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	0
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	4,259,562
	payments for services	1,149,169
	annual covered charges	4,259,562
13	annual payments for services	1,149,169
14		
15	inpatient CCR	0.397099079
16		
17	annual cost of services	1,691,468
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	4,396,268
23	adjusted Medicaid payments for services	1,186,050
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	1,186,050
	adjusted cost of services	1,745,754
27	,	, -, -
	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	DRG differential
	DRG differential adjustment rate	1.247124
	maximum annual payments (at DRG differential)	1,479,151
33	maximam aimaar payments (at 5116 aimerentiar)	1,173,131
	maximum annual payments	1,479,151
	facility specific UPL amount	293,101
36	racinty specific of Earnounc	255,101
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(920)
	allocation of supplemental payments	(120,932)
	total aggregate limit adjustments	(121,852)
41	total applicante mint adjustificitis	(121,032)
	UPL amount after aggregate limit adjustments	171,249
	Amount paid in April 2013 for 1st - 3rd quarters	128,437
	SFY2013 4th quarter UPL adjustment	42,812
	Outpatient overpayment reduction	(26,705)
	·	
	UPL funds - payout or recovery	16,108
47	0	5,547 10,561
	Net funds amount	10,561

	Facility Name	Piedmont Henry Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6	CALL status (1 – vos)	0
7 8	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	16,247,440
	payments for services	5,171,429
	annual covered charges	16,247,440
	annual payments for services	5,171,429
14	annual payments for services	3,171,423
	inpatient CCR	0.293100565
16	inputient con	0.233100303
	annual cost of services	4,762,134
18		.,, -=,== :
	adjustment factor	
	inflation	1.032094
21		
22	adjusted annual charges	16,768,885
	adjusted Medicaid payments for services	5,337,401
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	5,337,401
	adjusted cost of services	4,914,970
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	6,656,401
33		
34	maximum annual payments	6,656,401
35	facility specific UPL amount	1,319,000
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(4,141)
	allocation of supplemental payments	(544,209)
40	total aggregate limit adjustments	(548,350)
41		
	UPL amount after aggregate limit adjustments	770,650
	Amount paid in April 2013 for 1st - 3rd quarters	577,988
	SFY2013 4th quarter UPL adjustment	192,662
	Outpatient overpayment reduction	(114,291)
	UPL funds - payout or recovery	78,371
47	Intergovernmental transfer amount	26,991
	Net funds amount	51,380

	Facility Name	West Georgia Health Systems, Inc.
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4 5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7 8	CAH status (1 = yes)	0
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	10,729,935
	payments for services	4,143,180
	annual covered charges	10,729,935
	annual payments for services	4,143,180
14	. ,	, ,
15	inpatient CCR	0.46417825
16	·	
17	annual cost of services	4,980,602
18		, ,
19	adjustment factor	
	inflation	1.020655
21		
22	adjusted annual charges	10,951,562
23		4,228,757
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	4,228,757
26	adjusted cost of services	5,083,476
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	DRG differential
31	DRG differential adjustment rate	1.247124
32	maximum annual payments (at DRG differential)	5,273,784
33		
34	maximum annual payments	5,273,784
35	facility specific UPL amount	1,045,027
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(3,281)
39	allocation of supplemental payments	(431,171)
40	total aggregate limit adjustments	(434,452)
41		
	UPL amount after aggregate limit adjustments	610,575
	Amount paid in April 2013 for 1st - 3rd quarters	457,931
44	SFY2013 4th quarter UPL adjustment	152,644
45	Outpatient overpayment reduction	(65,733)
46	UPL funds - payout or recovery	86,911
47	Intergovernmental transfer amount	29,932
	Net funds amount	56,979

	Facility Name	Bacon County Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	1
8		
	Medicaid inpatient claims paid at amount > 0:	1 040 020
	covered charges	1,949,030
11	payments for services annual covered charges	660,395 1,949,030
	annual payments for services	660,395
14	aillidal payments for services	000,333
	inpatient CCR	0.473627775
16	inputerit con	0.173027773
-	annual cost of services	923,115
18		, -
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	2,011,582
23	adjusted Medicaid payments for services	681,590
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	681,590
26	adjusted cost of services	952,741
27		
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30		cost
	DRG differential adjustment rate	0.000000
	maximum annual payments (at DRG differential)	0
33		052.744
	maximum annual payments	952,741
	facility specific UPL amount	271,151
36 37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(851)
	allocation of Supplemental payments	(111,875)
	total aggregate limit adjustments	(112,726)
41	total aggicgate illini adjustificitis	(112,720)
	UPL amount after aggregate limit adjustments	158,425
	Amount paid in April 2013 for 1st - 3rd quarters	118,819
	SFY2013 4th quarter UPL adjustment	39,606
	Outpatient overpayment reduction	(28,453)
	UPL funds - payout or recovery	11,154
	Intergovernmental transfer amount	0
	Net funds amount	11,154
		·

	Facility Name	Bleckley Memorial Hospital
2	base period report period beginning date	04/01/09
3 4	base period report period ending date	03/31/10
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
	Medicaid inpatient claims paid at amount > 0:	
	covered charges	257,614
	payments for services	229,510
	annual covered charges	257,614
	annual payments for services	229,510
14	armaar payments for services	223,310
	inpatient CCR	1.112115378
16		1,1111111111111111111111111111111111111
17	annual cost of services	286,496
18		
	adjustment factor	
20	inflation	1.045408
21		
22	adjusted annual charges	269,312
23	adjusted Medicaid payments for services	239,932
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	239,932
26	adjusted cost of services	299,505
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	299,505
35	facility specific UPL amount	59,573
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(187)
	allocation of supplemental payments	(24,580)
40	total aggregate limit adjustments	(24,767)
41		
	UPL amount after aggregate limit adjustments	34,806
	Amount paid in April 2013 for 1st - 3rd quarters	26,105
	SFY2013 4th quarter UPL adjustment	8,701
	Outpatient overpayment reduction	(30,206)
	UPL funds - payout or recovery	(21,505)
47	Intergovernmental transfer amount	0
	Net funds amount	(21,505)

	Facility Name	Brooks County Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	1
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	477,134
11	payments for services	198,344
12	annual covered charges	477,134
13	annual payments for services	198,344
14		
15	inpatient CCR	0.358319128
16		
17	annual cost of services	170,966
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	486,989
23	adjusted Medicaid payments for services	202,441
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	202,441
26	adjusted cost of services	174,497
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	174,497
35	facility specific UPL amount	(27,944)
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	27,943
39	allocation of supplemental payments	0
40	total aggregate limit adjustments	27,943
41		
42	UPL amount after aggregate limit adjustments	(1)
43	Amount paid in April 2013 for 1st - 3rd quarters	(1)
44	SFY2013 4th quarter UPL adjustment	(0)
45	Outpatient overpayment reduction	(3,700)
46	UPL funds - payout or recovery	(3,700)
47	Intergovernmental transfer amount	0
	Net funds amount	(3,700)

	Facility Name	Calhoun Memorial Hospital
2	base period report period beginning date	04/01/09
3	base period report period ending date	03/31/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6	CALL status (1 – vos)	1
7 8	CAH status (1 = yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
_	covered charges	156,715
	payments for services	147,578
	annual covered charges	156,715
13	annual payments for services	147,578
14	annual payments for services	147,570
15	inpatient CCR	0.651704263
16	inpatient cert	0.031704203
17	annual cost of services	102,132
18	annual cost of services	102,132
_	adjustment factor	
20	inflation	1.045408
21	macion	1.043400
	adjusted annual charges	163,831
23	adjusted Medicaid payments for services	154,279
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	154,279
26	adjusted cost of services	106,770
27	adjusted cost of services	100,770
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33	The same and the s	•
34	maximum annual payments	106,770
35		(47,509)
36	,	(11,555)
	aggregate limit adjustments	
	allocation of UPL amounts < 0	47,510
39		0
	total aggregate limit adjustments	47,510
41	,	,
	UPL amount after aggregate limit adjustments	1
	Amount paid in April 2013 for 1st - 3rd quarters	1
	SFY2013 4th quarter UPL adjustment	0
	Outpatient overpayment reduction	(4,207)
	UPL funds - payout or recovery	(4,207)
47	_ ·	0
	Net funds amount	(4,207)

	Facility Name	Candler County Hospital
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	CATI Status (1 – yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	626,664
	payments for services	419,097
	annual covered charges	626,664
	annual payments for services	419,097
14	aaa. payee. oo oo need	.23,637
	inpatient CCR	0.669274333
16		0.00027 1.000
17	annual cost of services	419,410
18	44	.23,.23
	adjustment factor	
20	inflation	1.022716
21		1.012, 10
	adjusted annual charges	640,899
23	adjusted Medicaid payments for services	428,617
24		0
	total adjusted Medicaid payments	428,617
26		428,937
27	adjusted cost of selffices	123,337
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33	maximum annual payments (at DNG anterential)	0
	maximum annual payments	428,937
	facility specific UPL amount	320
36	racincy specific of Earnounc	320
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(1)
	allocation of supplemental payments	(132)
	total aggregate limit adjustments	(133)
41	total apprepare initi adjustificitis	(155)
	UPL amount after aggregate limit adjustments	187
	Amount paid in April 2013 for 1st - 3rd quarters	140
	SFY2013 4th quarter UPL adjustment	47
	Outpatient overpayment reduction	(10,124)
	UPL funds - payout or recovery	(10,124)
47		(10,077)
47	Net funds amount	(10,077)
	Net rands amount	(10,077)

	Facility Name	Charlton Memorial Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8		
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	44,724
	payments for services	28,304
12	annual covered charges	44,724
13	annual payments for services	28,304
14		
15	inpatient CCR	0.576049114
16		
17	annual cost of services	25,763
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	46,159
23	adjusted Medicaid payments for services	29,212
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	29,212
26	adjusted cost of services	26,590
27	,	-,
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0.000000
33	maximum annual payments (at DNG amerential)	0
	maximum annual payments	26,590
	facility specific UPL amount	(2,622)
36	facility specific or Lamount	(2,022)
	aggregate limit adjustments	
		2 622
	allocation of UPL amounts < 0 allocation of supplemental payments	2,622
39		0
	total aggregate limit adjustments	2,622
41	LIDI amazunt aftan amazanta lincit adiuatus anta	0
	UPL amount after aggregate limit adjustments	0
	Amount paid in April 2013 for 1st - 3rd quarters	0
	SFY2013 4th quarter UPL adjustment	0 (7.115)
	Outpatient overpayment reduction	(7,115)
	UPL funds - payout or recovery	(7,115)
47	6	0
	Net funds amount	(7,115)

	Facility Name	Chatuge Regional Hospital
2	base period report period beginning date	05/01/09
3	base period report period ending date	04/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	1
8	, , ,	
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	87,529
	payments for services	55,659
	annual covered charges	87,529
	annual payments for services	55,659
14		52,255
	inpatient CCR	0.486521086
16		0.1000=2000
	annual cost of services	42,585
18	annual cost of services	12,303
	adjustment factor	
	inflation	1.040932
21	macion	1.040332
	adjusted annual charges	91,112
23		57,937
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	57,937
26		44,328
27	adjusted cost of services	44,328
	other UPL calculation data	
		Non-State Govt.
29	provider category for UPL calculation	
30	basis for UPL calculation DRG differential adjustment rate	cost
		0.000000
32	maximum annual payments (at DRG differential)	0
33	maximum annual naumonts	44,328
	maximum annual payments	,
36	facility specific UPL amount	(13,609)
	aggragata limit adjustments	
	aggregate limit adjustments	12.000
	allocation of UPL amounts < 0	13,609
	allocation of supplemental payments	12.000
	total aggregate limit adjustments	13,609
41	LIDI and and after a second at limits a division and	0
	UPL amount after aggregate limit adjustments	0
	Amount paid in April 2013 for 1st - 3rd quarters	0
	SFY2013 4th quarter UPL adjustment	(2.540)
	Outpatient overpayment reduction	(2,548)
	UPL funds - payout or recovery	(2,547)
47	Intergovernmental transfer amount	0
	Net funds amount	(2,547)

	Facility Name	Clinch Memorial Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6	CALL status (1s)	1
7	CAH status (1 = yes)	1
8	Madicald investigat elementarial at annount > 0.	
9	Medicaid inpatient claims paid at amount > 0:	265.045
	covered charges	265,015
	payments for services	141,776
	annual covered charges	265,015
13	annual payments for services	141,776
14		
15	inpatient CCR	0.817951382
16		
17	annual cost of services	216,769
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	273,520
23	adjusted Medicaid payments for services	146,326
24		0
	total adjusted Medicaid payments	146,326
26		223,726
27	adjusted cost of services	223,720
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33	manifestina annual national nation	222 726
	maximum annual payments	223,726
35	facility specific UPL amount	77,400
36		
	aggregate limit adjustments	(2.22)
	allocation of UPL amounts < 0	(243)
	allocation of supplemental payments	(31,935)
	total aggregate limit adjustments	(32,178)
41		
	UPL amount after aggregate limit adjustments	45,222
	Amount paid in April 2013 for 1st - 3rd quarters	33,917
44	SFY2013 4th quarter UPL adjustment	11,305
45	Outpatient overpayment reduction	(8,706)
46	UPL funds - payout or recovery	2,600
47	Intergovernmental transfer amount	0
	Net funds amount	2,600

	Facility Name	Effingham Hospital	
2	base period report period beginning date	0 1	07/01/09
3	base period report period ending date		06/30/10
4			
5 6	adjustment factor (if period not equal to 1 year)		1.0000
7	CAH status (1 = yes)		1
8	Madisaid innations alaims paid at amount > 0.		
9	Medicaid inpatient claims paid at amount > 0:		47.011
	covered charges		47,011
	payments for services		25,624
	annual covered charges		47,011
	annual payments for services		25,624
14	investigat CCD		0.700022020
	inpatient CCR		0.700822928
16			22.046
	annual cost of services		32,946
18			
	adjustment factor		
	inflation		1.032094
21			
	adjusted annual charges		48,520
	adjusted Medicaid payments for services		26,446
	supplemental rate adjustment payments		0
	total adjusted Medicaid payments		26,446
26	adjusted cost of services		34,003
27			
28	other UPL calculation data		
29	provider category for UPL calculation	Non-State Govt.	
	basis for UPL calculation	cost	
31	DRG differential adjustment rate		0.000000
32	maximum annual payments (at DRG differential)		0
33			
34	maximum annual payments		34,003
35	facility specific UPL amount		7,557
36			
37	aggregate limit adjustments		
38	allocation of UPL amounts < 0		(24)
39	allocation of supplemental payments		(3,118)
40	total aggregate limit adjustments		(3,142)
41			
42	UPL amount after aggregate limit adjustments		4,415
	Amount paid in April 2013 for 1st - 3rd quarters		3,311
	SFY2013 4th quarter UPL adjustment		1,104
	Outpatient overpayment reduction		(16,627)
	UPL funds - payout or recovery		(15,523)
	Intergovernmental transfer amount		0
•	Net funds amount		(15,523)
			(-//

	Facility Name	Higgins General Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8 9	Modicaid innations claims naid at amount > 0	
	Medicaid inpatient claims paid at amount > 0:	1 562 002
	covered charges	1,562,903
	payments for services	507,122
	annual covered charges	1,562,903
13	annual payments for services	507,122
14		0.50040000
15	inpatient CCR	0.502198387
16		
17	annual cost of services	784,887
18		
	<u>adjustment factor</u>	
20	inflation	1.032094
21		
22	adjusted annual charges	1,613,063
23	adjusted Medicaid payments for services	523,398
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	523,398
26	adjusted cost of services	810,077
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	810,077
35	facility specific UPL amount	286,679
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(900)
39	allocation of supplemental payments	(118,282)
40	total aggregate limit adjustments	(119,182)
41	,	, , ,
	UPL amount after aggregate limit adjustments	167,497
43	Amount paid in April 2013 for 1st - 3rd quarters	125,623
44	SFY2013 4th quarter UPL adjustment	41,874
45		(17,795)
	UPL funds - payout or recovery	24,079
47	Intergovernmental transfer amount	0
.,	Net funds amount	24,079
		21,073

	Facility Name	Jasper Memorial Hospital	
2	base period report period beginning date		10/01/09
3	base period report period ending date		09/30/10
4			
5 6	adjustment factor (if period not equal to 1 year)		1.0000
7	CAH status (1 = yes)		1
8	Madicald innations claims paid at amount > 0.		
10	<u>Medicaid inpatient claims paid at amount > 0:</u> covered charges		EO 447
	payments for services		59,447 37,378
	annual covered charges		59,447
14	annual payments for services		37,378
	innationt CCD		1 042045142
	inpatient CCR		1.042945142
16	annual anatof comitant		C2 000
	annual cost of services		62,000
18			
	adjustment factor		4.020655
	inflation		1.020655
21			50 5 7
	adjusted annual charges		60,675
23	, ,		38,150
	supplemental rate adjustment payments		0
	total adjusted Medicaid payments		38,150
	adjusted cost of services		63,281
27			
	other UPL calculation data		
	provider category for UPL calculation	Non-State Govt.	
	basis for UPL calculation	cost	
	DRG differential adjustment rate		0.000000
32 33	maximum annual payments (at DRG differential)		0
34	maximum annual payments		63,281
35	facility specific UPL amount		25,131
36			
37	aggregate limit adjustments		
38	allocation of UPL amounts < 0		(79)
39	allocation of supplemental payments		(10,369)
40	total aggregate limit adjustments		(10,448)
41			
42	UPL amount after aggregate limit adjustments		14,683
43	Amount paid in April 2013 for 1st - 3rd quarters		11,012
	SFY2013 4th quarter UPL adjustment		3,671
	Outpatient overpayment reduction		(8,246)
	UPL funds - payout or recovery		(4,575)
	Intergovernmental transfer amount		0
	Net funds amount		(4,575)
			• • • •

	Facility Name	Jeff Davis Hospital	
2	base period report period beginning date		10/01/09
3	base period report period ending date		09/30/10
4			
5	adjustment factor (if period not equal to 1 year)		1.0000
6			
7	CAH status (1 = yes)		1
8			
9	Medicaid inpatient claims paid at amount > 0:		
10	covered charges		1,491,060
11	payments for services		625,848
12	annual covered charges		1,491,060
13	annual payments for services		625,848
14			
15	inpatient CCR		0.38050026
16			
17	annual cost of services		567,349
18			
19	adjustment factor		
20	inflation		1.020655
21			
22	adjusted annual charges		1,521,858
23	adjusted Medicaid payments for services		638,775
24	supplemental rate adjustment payments		0
25	total adjusted Medicaid payments		638,775
26	adjusted cost of services		579,068
27			
28	other UPL calculation data		
29	provider category for UPL calculation	Non-State Govt.	
30	basis for UPL calculation	cost	
31	DRG differential adjustment rate		0.000000
32	maximum annual payments (at DRG differential)		0
33	, , , , , , , , , , , , , , , , , , , ,		
34	maximum annual payments		579,068
35	facility specific UPL amount		(59,707)
36			, , ,
37	aggregate limit adjustments		
	allocation of UPL amounts < 0		59,708
39	allocation of supplemental payments		0
40	total aggregate limit adjustments		59,708
41	22 0 ,		,
	UPL amount after aggregate limit adjustments		1
	Amount paid in April 2013 for 1st - 3rd quarters		1
	SFY2013 4th quarter UPL adjustment		(0)
	Outpatient overpayment reduction		(11,267)
	UPL funds - payout or recovery		(11,267)
47	Intergovernmental transfer amount		0
•	Net funds amount		(11,267)

	Facility Name	Liberty Regional Medical Center
2	base period report period beginning date	12/01/09
3	base period report period ending date	11/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	Madicald innations alaims paid at amount > 0	
9	Medicaid inpatient claims paid at amount > 0:	2 951 620
	covered charges	2,851,630
	payments for services	1,069,098
	annual covered charges	2,851,630
13	annual payments for services	1,069,098
14		
	inpatient CCR	0.331603369
16		
17	annual cost of services	945,610
18		
	<u>adjustment factor</u>	
20	inflation	1.022028
21		
22	adjusted annual charges	2,914,446
23	adjusted Medicaid payments for services	1,092,648
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	1,092,648
26	adjusted cost of services	966,440
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	966,440
35	facility specific UPL amount	(126,208)
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	126,208
39	allocation of supplemental payments	0
	total aggregate limit adjustments	126,208
41	,	,
	UPL amount after aggregate limit adjustments	0
	Amount paid in April 2013 for 1st - 3rd quarters	0
	SFY2013 4th quarter UPL adjustment	0
	Outpatient overpayment reduction	(32,919)
	UPL funds - payout or recovery	(32,918)
	Intergovernmental transfer amount	0
.,	Net funds amount	(32,918)
		(32,310)

	Facility Name	Louis Smith Memorial Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	M 15 115 15 15 15 15 15 15 15 15 15 15 15	
9	Medicaid inpatient claims paid at amount > 0:	404.242
	covered charges	484,213
	payments for services	216,486
	annual covered charges	484,213
13	annual payments for services	216,486
14		
15	inpatient CCR	0.485922337
16		
17	annual cost of services	235,290
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	494,214
23	adjusted Medicaid payments for services	220,958
24		0
	total adjusted Medicaid payments	220,958
26	adjusted cost of services	240,150
27	adjusted cost of services	240,130
	other UPL calculation data	
		Non State Cout
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		240.450
	maximum annual payments	240,150
	facility specific UPL amount	19,192
36		
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(60)
	allocation of supplemental payments	(7,919)
40	total aggregate limit adjustments	(7,979)
41		
42	UPL amount after aggregate limit adjustments	11,213
43	Amount paid in April 2013 for 1st - 3rd quarters	8,410
44	SFY2013 4th quarter UPL adjustment	2,803
	Outpatient overpayment reduction	(94,032)
	UPL funds - payout or recovery	(91,229)
47		0
	Net funds amount	(91,229)
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

	Facility Name	Miller County Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	CATIStatus (1 – yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	1,726,891
11	payments for services	633,483
12	annual covered charges	1,726,891
13	annual payments for services	633,483
14	• •	·
15	inpatient CCR	0.423622188
16	•	
17	annual cost of services	731,549
18		,
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	1,782,314
23	adjusted Medicaid payments for services	653,814
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	653,814
	adjusted cost of services	755,027
27	•	,
28	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
30	· · · · · · · · · · · · · · · · · · ·	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33	, , , , ,	
	maximum annual payments	755,027
35	facility specific UPL amount	101,213
36	, .	,
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(318)
39		(41,760)
40	total aggregate limit adjustments	(42,078)
41	,	
42	UPL amount after aggregate limit adjustments	59,135
43		44,351
44	SFY2013 4th quarter UPL adjustment	14,784
	Outpatient overpayment reduction	(9,611)
46	UPL funds - payout or recovery	5,173
47		0
	Net funds amount	5,173

	Facility Name	Mitchell County Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	CAT Status (1 - yes)	-
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	288,764
	payments for services	144,983
	annual covered charges	288,764
	annual payments for services	144,983
14	annual payments for services	144,303
	inpatient CCR	0.335057652
16	inpution con	0.333037032
17	annual cost of services	96,753
18		36,.33
	adjustment factor	
20		1.020655
21		1.020000
	adjusted annual charges	294,728
23	adjusted Medicaid payments for services	147,978
24		0
	total adjusted Medicaid payments	147,978
26		98,751
27	adjusted cost of services	33), 31
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32		0
33	maximum annual payments (at DNG amerential)	· ·
	maximum annual payments	98,751
	facility specific UPL amount	(49,227)
36	racinty specific of Earnounc	(43,227)
	aggregate limit adjustments	
	allocation of UPL amounts < 0	49,227
	allocation of supplemental payments	0
	total aggregate limit adjustments	49,227
41	total aggi egate illine adjustille.its	,==:
	UPL amount after aggregate limit adjustments	(0)
	Amount paid in April 2013 for 1st - 3rd quarters	0
	SFY2013 4th quarter UPL adjustment	(0)
	Outpatient overpayment reduction	(7,136)
	UPL funds - payout or recovery	(7,136)
	Intergovernmental transfer amount	0
.,	Net funds amount	(7,136)
		(7,130)

	Facility Name	Monroe County Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	291,490
11	payments for services	166,312
12	annual covered charges	291,490
13	annual payments for services	166,312
14		
15	inpatient CCR	0.641971041
16	·	
17	annual cost of services	187,128
18		,
	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	297,511
23	adjusted Medicaid payments for services	169,747
24		0
	total adjusted Medicaid payments	169,747
26	adjusted cost of services	190,993
27		150,555
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32		0
33	maximam annual payments (at 2110 anner ential)	ŭ
	maximum annual payments	190,993
	facility specific UPL amount	21,246
36	radinty specific of Lambane	21,210
	aggregate limit adjustments	
	allocation of UPL amounts < 0	(67)
	allocation of supplemental payments	(8,766)
	total aggregate limit adjustments	(8,833)
41		(5,655)
	UPL amount after aggregate limit adjustments	12,413
	Amount paid in April 2013 for 1st - 3rd quarters	9,310
	SFY2013 4th quarter UPL adjustment	3,103
	Outpatient overpayment reduction	(7,304)
	UPL funds - payout or recovery	(4,201)
	Intergovernmental transfer amount	0
7,	Net funds amount	(4,201)
	and announce	(3,201)

	Facility Name	Morgan Memorial Hospital
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	1
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	88,996
11	payments for services	55,947
12	annual covered charges	88,996
13	annual payments for services	55,947
14	. ,	ŕ
15	inpatient CCR	0.583147045
16	•	
17	annual cost of services	51,898
18		ŕ
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	91,852
23	adjusted Medicaid payments for services	57,743
24	supplemental rate adjustment payments	, 0
	total adjusted Medicaid payments	57,743
26	adjusted cost of services	53,564
27	,	
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33	, , , , , , , , , , , , , , , , , , , ,	_
	maximum annual payments	53,564
35	facility specific UPL amount	(4,179)
36	, . , . , . ,	() = /
	aggregate limit adjustments	
	allocation of UPL amounts < 0	4,180
39		0
	total aggregate limit adjustments	4,180
41		,,
	UPL amount after aggregate limit adjustments	1
	Amount paid in April 2013 for 1st - 3rd quarters	0
	SFY2013 4th quarter UPL adjustment	0
	Outpatient overpayment reduction	(5,840)
	UPL funds - payout or recovery	(5,840)
47	_ ·	0
.,	Net funds amount	(5,840)
		(3,340)

	Facility Name	Optim Medical Center-Jenkins
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	CATI Status (1 – yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	284,950
	payments for services	184,040
	annual covered charges	284,950
	annual payments for services	184,040
14	ailluai payments for services	184,040
	inpatient CCR	0.658057696
16	inpatient CCK	0.038037090
17	annual cost of services	187,514
18	allitual Cost of Services	167,314
	adjustment factor	
	inflation	1.032094
21	IIIIation	1.032094
	adjusted annual charges	294,095
23		189,947
	supplemental rate adjustment payments	190.047
	total adjusted Medicaid payments	189,947
	adjusted cost of services	193,532
27	ather LIDL calculation data	
	other UPL calculation data	Duivata
29	provider category for UPL calculation	Private
30		cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33	manufacture and the control of the c	102 522
	maximum annual payments	193,532
	facility specific UPL amount	3,585
36	and the limit of the training of the contract	
	aggregate limit adjustments	(10)
	allocation of UPL amounts < 0	(18)
	allocation of supplemental payments	(3,155)
	total aggregate limit adjustments	(3,173)
41	LIDI anagunt after against the tradition to a	442
	UPL amount after aggregate limit adjustments	412
	Amount paid in April 2013 for 1st - 3rd quarters	309
	SFY2013 4th quarter UPL adjustment	103
	Outpatient overpayment reduction	(5,997)
	UPL funds - payout or recovery	(5,894)
47	Intergovernmental transfer amount	0
	Net funds amount	(5,894)

	Facility Name	Peach Regional Medical Center
2	base period report period beginning date	11/01/09
3 4	base period report period ending date	10/31/10
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7 8	CAH status (1 = yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	592,761
11		369,729
12	annual covered charges	592,761
	annual payments for services	369,729
14		
15	inpatient CCR	0.570280882
16	•	
17	annual cost of services	338,040
18		,
19	adjustment factor	
	inflation	1.021341
21		
22	adjusted annual charges	605,411
	adjusted Medicaid payments for services	377,619
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	377,619
26	adjusted cost of services	345,254
27	•	
28	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	345,254
35	facility specific UPL amount	(32,365)
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	32,365
39	allocation of supplemental payments	0
40	total aggregate limit adjustments	32,365
41		
	UPL amount after aggregate limit adjustments	0
43	Amount paid in April 2013 for 1st - 3rd quarters	0
44	SFY2013 4th quarter UPL adjustment	0
45	Outpatient overpayment reduction	(11,430)
	UPL funds - payout or recovery	(11,429)
47	Intergovernmental transfer amount	0
	Net funds amount	(11,429)

	Facility Name	Pioneer Community Hospital of Early
	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
5	adjustment factor (if period not equal to 1 year)	1.0000
6 7	CAH status (1 = yes)	1
8 9	Modicaid innationt claims paid at amount > 0:	
	Medicaid inpatient claims paid at amount > 0: covered charges	169,629
	payments for services	73,133
	annual covered charges	169,629
	annual payments for services	73,133
14	annual payments for services	73,133
	inpatient CCR	0.424846387
16		0.12.0.000
_	annual cost of services	72,066
18		,
19	adjustment factor	
	inflation	1.020655
21		
22	adjusted annual charges	173,133
23	adjusted Medicaid payments for services	74,644
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	74,644
26	adjusted cost of services	73,555
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
	maximum annual payments	73,555
	facility specific UPL amount	(1,089)
36		
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	1,089
	allocation of supplemental payments	0
	total aggregate limit adjustments	1,089
41	LIDI amazont after a supranta Booth a discount	(0)
	UPL amount after aggregate limit adjustments	(0)
	Amount paid in April 2013 for 1st - 3rd quarters	0
	SFY2013 4th quarter UPL adjustment	(0)
	Outpatient overpayment reduction	(7,387)
	UPL funds - payout or recovery	(7,387)
4/	Intergovernmental transfer amount Net funds amount	0 (7.387)
	וזיכנ ועוועט מוווטעוונ	(7,387)

	Facility Name	Polk Medical Center	
2	base period report period beginning date		10/01/09
3	base period report period ending date		09/30/10
4			
5 6	adjustment factor (if period not equal to 1 year)		1.0000
7	CAH status (1 = yes)		1
8	CATI Status (1 – yes)		1
9	Medicaid inpatient claims paid at amount > 0:		
	covered charges		459,215
	payments for services		200,478
	annual covered charges		459,215
	annual payments for services		200,478
14	annual payments for services		200,476
	innationt CCD		0.487066491
	inpatient CCR		0.467000491
16	annual cost of services		222.000
17	annual cost of services		223,668
18	adicator and factor		
	adjustment factor		1 020655
20	inflation		1.020655
21	adicated according		460.700
	adjusted annual charges		468,700
23	adjusted Medicaid payments for services		204,619
24	, , ,		0
	total adjusted Medicaid payments		204,619
26	adjusted cost of services		228,288
27			
28	other UPL calculation data		
29	provider category for UPL calculation	Non-State Govt.	
30	basis for UPL calculation	cost	
31	DRG differential adjustment rate		0.000000
32	maximum annual payments (at DRG differential)		0
33			
	maximum annual payments		228,288
	facility specific UPL amount		23,669
36			
37	aggregate limit adjustments		
	allocation of UPL amounts < 0		(74)
39	allocation of supplemental payments		(9,766)
40	total aggregate limit adjustments		(9,840)
41			
	UPL amount after aggregate limit adjustments		13,829
43	Amount paid in April 2013 for 1st - 3rd quarters		10,372
44	SFY2013 4th quarter UPL adjustment		3,457
45	Outpatient overpayment reduction		(52,010)
46	UPL funds - payout or recovery		(48,553)
47	Intergovernmental transfer amount		0
	Net funds amount		(48,553)

	Facility Name	Putnam General Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7 8	CAH status (1 = yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	384,567
	payments for services	259,357
	annual covered charges	384,567
	annual payments for services	259,357
14	annual payments for services	233,337
	inpatient CCR	0.859752662
16	The state of the s	0.000,0000
_	annual cost of services	330,633
18		333,333
	adjustment factor	
	inflation	1.020655
21		
	adjusted annual charges	392,510
23		264,714
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	264,714
	adjusted cost of services	337,462
27		33.7,.32
	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
	maximum annual payments (at DRG differential)	0
33	(_
	maximum annual payments	337,462
	facility specific UPL amount	72,748
36	., ., .,	, -
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(228)
	allocation of supplemental payments	(30,015)
	total aggregate limit adjustments	(30,243)
41		(==, =,
	UPL amount after aggregate limit adjustments	42,505
	Amount paid in April 2013 for 1st - 3rd quarters	31,879
	SFY2013 4th quarter UPL adjustment	10,626
	Outpatient overpayment reduction	(16,072)
	UPL funds - payout or recovery	(5,446)
	Intergovernmental transfer amount	0
	Net funds amount	(5,446)
		(5) 110)

	Facility Name	Southwest GA Regional Med. Ctr.
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	NA dissid investigat elsings usid at aux sunt > 0.	
9	Medicaid inpatient claims paid at amount > 0:	202.400
	covered charges	292,489
	payments for services	128,492
	annual covered charges	292,489
	annual payments for services	128,492
14		
15	inpatient CCR	0.416608871
16		
17	annual cost of services	121,854
18		
19	adjustment factor	
20	inflation	1.032094
21		
22	adjusted annual charges	301,876
23	adjusted Medicaid payments for services	132,616
24		0
	total adjusted Medicaid payments	132,616
26		125,765
27	,	-,
	other UPL calculation data	
29	provider category for UPL calculation	Non-State Govt.
30	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32		0
33	maximum annual payments (at DNG unterential)	Ü
	maximum annual payments	125 765
	facility specific UPL amount	125,765
36	racility specific OPE amount	(6,851)
	aggregate limit adjustments	
	aggregate limit adjustments	6.053
	allocation of UPL amounts < 0	6,852
	allocation of supplemental payments	0
	total aggregate limit adjustments	6,852
41		
	UPL amount after aggregate limit adjustments	1
	Amount paid in April 2013 for 1st - 3rd quarters	1
	SFY2013 4th quarter UPL adjustment	(0)
	Outpatient overpayment reduction	(16,942)
	UPL funds - payout or recovery	(16,942)
47	Intergovernmental transfer amount	0
	Net funds amount	(16,942)

	Facility Name	Sylvan Grove Hospital	
2	base period report period beginning date	01/01/10)
3	base period report period ending date	12/31/10	
4		. ,	
5 6	adjustment factor (if period not equal to 1 year)	1.0000)
7	CAH status (1 = yes)	1	L
8			
9	Medicaid inpatient claims paid at amount > 0:		
	covered charges	69,063	
	payments for services	34,972	
	annual covered charges	69,063	
13	annual payments for services	34,972	-
14			
15	inpatient CCR	0.231476103	,
16			
17	annual cost of services	15,986	;
18			
19	adjustment factor		
20	inflation	1.022716	5
21			
22	adjusted annual charges	70,632	<u>, </u>
	adjusted Medicaid payments for services	35,766	
	supplemental rate adjustment payments	0	
	total adjusted Medicaid payments	35,766	
	adjusted cost of services	16,349	
27	adjusted cost of services	10,343	
	other UPL calculation data		
	provider category for UPL calculation	Non-State Govt.	
	basis for UPL calculation		
	DRG differential adjustment rate	cost 0.000000	,
33	maximum annual payments (at DRG differential)	0	'
34	maximum annual payments	16,349)
35	facility specific UPL amount	(19,417))
36			
37	aggregate limit adjustments		
38	allocation of UPL amounts < 0	19,416	
	allocation of supplemental payments	0	
	total aggregate limit adjustments	19,416	
41	, , ,		
	UPL amount after aggregate limit adjustments	(1))
	Amount paid in April 2013 for 1st - 3rd quarters	0	
	SFY2013 4th quarter UPL adjustment	0	
	Outpatient overpayment reduction	(13,485)	١
	UPL funds - payout or recovery	(13,485)	
47		(13,463)	
4/	Net funds amount	(13,485)	
	ivet runus amount	(15,465)	,

	Facility Name	Warm Springs Medical Center
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = vos)	1
8	CAH status (1 = yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	163,832
11	payments for services	83,218
12	annual covered charges	163,832
	annual payments for services	83,218
14	,	,
15	inpatient CCR	0.648518139
16		
17	annual cost of services	106,248
18	annual cost of services	100,2 10
	adjustment factor	
	inflation	1.022716
21	imation	1.022/10
	adjusted annual charges	167,554
23	adjusted Medicaid payments for services	85,108
		·
24	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	85,108
	adjusted cost of services	108,662
27		
	other UPL calculation data	
	provider category for UPL calculation	Non-State Govt.
	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	108,662
35	facility specific UPL amount	23,554
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(74)
39	allocation of supplemental payments	(9,718)
40	total aggregate limit adjustments	(9,792)
41		
42	UPL amount after aggregate limit adjustments	13,762
43	Amount paid in April 2013 for 1st - 3rd quarters	10,322
44	SFY2013 4th quarter UPL adjustment	3,440
45	Outpatient overpayment reduction	(18,314)
46	UPL funds - payout or recovery	(14,874)
47	Intergovernmental transfer amount	0
	Net funds amount	(14,874)
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

	Facility Name	Wills Memorial Hospital	
2	base period report period beginning date	•	05/01/09
3	base period report period ending date		04/30/10
4			
5	adjustment factor (if period not equal to 1 year)		1.0000
6			
7	CAH status (1 = yes)		1
8			
9	Medicaid inpatient claims paid at amount > 0:		
10	covered charges		290,515
11	payments for services		170,953
12	annual covered charges		290,515
	annual payments for services		170,953
14	• •		·
15	inpatient CCR		0.694085
16	•		
17	annual cost of services		201,642
18			,
19	adjustment factor		
20	inflation		1.040932
21			
	adjusted annual charges		302,406
23			177,950
	supplemental rate adjustment payments		0
	total adjusted Medicaid payments		177,950
	adjusted cost of services		209,896
27	aujusteu 555t 5. 55. 11655		_00,000
	other UPL calculation data		
	provider category for UPL calculation	Non-State Govt.	
	basis for UPL calculation	cost	
	DRG differential adjustment rate		0.000000
	maximum annual payments (at DRG differential)		0
33	The same and a payment (at 2110 and election)		· ·
	maximum annual payments		209,896
	facility specific UPL amount		31,946
36			02,0.0
37	aggregate limit adjustments		
	allocation of UPL amounts < 0		(100)
39	allocation of supplemental payments		(13,181)
	total aggregate limit adjustments		(13,281)
41	total a ₀₀ , o ₀ ato illine aajastinonts		(10)101)
	UPL amount after aggregate limit adjustments		18,665
	Amount paid in April 2013 for 1st - 3rd quarters		13,999
	SFY2013 4th quarter UPL adjustment		4,666
	Outpatient overpayment reduction		(3,112)
	UPL funds - payout or recovery		1,555
47			0
••	Net funds amount		1,555
			_,555

	Facility Name	Good Samaritan Hospital
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	1
8		
9	Medicaid inpatient claims paid at amount > 0:	255 424
	covered charges	256,131
11	. ,	157,352
	annual covered charges	256,131
13	annual payments for services	157,352
14		
15	inpatient CCR	0.686320642
16		
17	annual cost of services	175,788
18		
19	adjustment factor	
20	inflation	1.022716
21		
22	adjusted annual charges	261,949
23	adjusted Medicaid payments for services	160,926
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	160,926
26	adjusted cost of services	179,781
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Private
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	179,781
35	facility specific UPL amount	18,855
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(94)
39	allocation of supplemental payments	(16,593)
40	total aggregate limit adjustments	(16,687)
41		
42	UPL amount after aggregate limit adjustments	2,168
	Amount paid in April 2013 for 1st - 3rd quarters	1,626
	SFY2013 4th quarter UPL adjustment	542
	Outpatient overpayment reduction	(28,137)
	UPL funds - payout or recovery	(27,595)
	Intergovernmental transfer amount	0
	Net funds amount	(27,595)

	Facility Name	Lower Oconee Community Hospital
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	Critistatus (1 yes)	-
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	1,476,683
11	payments for services	704,085
12	annual covered charges	1,476,683
13	annual payments for services	704,085
14		
15	inpatient CCR	0.402596543
16		
17	annual cost of services	594,507
18		
19	adjustment factor	
20	inflation	1.022716
21		
22	adjusted annual charges	1,510,227
23	adjusted Medicaid payments for services	720,079
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	720,079
26	adjusted cost of services	608,012
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Private
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	608,012
35	facility specific UPL amount	(112,067)
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	112,067
39	allocation of supplemental payments	0
40	total aggregate limit adjustments	112,067
41		
	UPL amount after aggregate limit adjustments	(0)
	Amount paid in April 2013 for 1st - 3rd quarters	0
	SFY2013 4th quarter UPL adjustment	(0)
	Outpatient overpayment reduction	(8,457)
46	UPL funds - payout or recovery	(8,457)
47	0	0
	Net funds amount	(8,457)

	Facility Name	Mountain Lakes Medical Center
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8 9	Modicaid innationt claims naid at amount > 0:	
	Medicaid inpatient claims paid at amount > 0:	127.040
	covered charges	127,949
	payments for services	85,172 137,040
	annual covered charges	127,949
	annual payments for services	85,172
14		0.005=00.444
	inpatient CCR	0.836703414
16		
17	annual cost of services	107,055
18		
	<u>adjustment factor</u>	
	inflation	1.022716
21		
22	adjusted annual charges	130,855
23	, ,	87,107
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	87,107
26	adjusted cost of services	109,487
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Private
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	109,487
35	facility specific UPL amount	22,380
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(111)
39	allocation of supplemental payments	(19,696)
40	total aggregate limit adjustments	(19,807)
41		
42	UPL amount after aggregate limit adjustments	2,573
43	Amount paid in April 2013 for 1st - 3rd quarters	1,930
	SFY2013 4th quarter UPL adjustment	643
	Outpatient overpayment reduction	(13,353)
	UPL funds - payout or recovery	(12,710)
	Intergovernmental transfer amount	0
	Net funds amount	(12,710)

	Facility Name	Optim Medical Center-Screven
2	base period report period beginning date	07/01/09
3	base period report period ending date	06/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7 8	CAH status (1 = yes)	1
9	Modicaid innationt claims paid at amount > 0:	
_	<u>Medicaid inpatient claims paid at amount > 0:</u> covered charges	307,523
	payments for services	247,344
	annual covered charges	307,523
	annual payments for services	247,344
14	annual payments for services	247,344
	inpatient CCR	0.827358172
16	inpatient cert	0.827338172
_	annual cost of services	254,432
18	ailliudi Cost of Services	234,432
	adjustment factor	
	inflation	1.032094
21	imation	1.032034
	adjusted annual charges	317,393
23		255,282
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	255,282
	adjusted cost of services	262,598
27	adjusted cost of services	202,330
	other UPL calculation data	
	provider category for UPL calculation	Private
	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
	maximum annual payments (at DRG differential)	0
33	maximum annual payments (at DNG unreferitial)	Ü
	maximum annual payments	262,598
	facility specific UPL amount	7,316
36	racinty specific of Earnount	7,310
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(36)
	allocation of supplemental payments	(6,438)
	total aggregate limit adjustments	(6,474)
41	total apprepare illine adjustificitis	(0,474)
	UPL amount after aggregate limit adjustments	842
	Amount paid in April 2013 for 1st - 3rd quarters	632
	SFY2013 4th quarter UPL adjustment	210
	Outpatient overpayment reduction	(13,053)
	UPL funds - payout or recovery	(12,843)
	Intergovernmental transfer amount	0
.,	Net funds amount	(12,843)
		(12,043)

	Facility Name	Optim Medical Center-Tattnall
2	base period report period beginning date	01/01/10
3	base period report period ending date	12/31/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7 8	CAH status (1 = yes)	1
9	Medicaid inpatient claims paid at amount > 0:	
	covered charges	3,800,672
	payments for services	524,452
	annual covered charges	3,800,672
	annual payments for services	524,452
14	aaa. payea re. se. ries	31.,.31
	inpatient CCR	0.3107461
16		5.5.2552
17	annual cost of services	1,181,044
18		_,,
	adjustment factor	
	inflation	1.022716
21		
	adjusted annual charges	3,887,008
23		536,365
24		0
	total adjusted Medicaid payments	536,365
	adjusted cost of services	1,207,873
27	,	_,,,,
	other UPL calculation data	
	provider category for UPL calculation	Private
	basis for UPL calculation	cost
	DRG differential adjustment rate	0.000000
	maximum annual payments (at DRG differential)	0
33	(_
	maximum annual payments	1,207,873
35	facility specific UPL amount	671,508
36	, . , . , . ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
37	aggregate limit adjustments	
	allocation of UPL amounts < 0	(3,345)
	allocation of supplemental payments	(590,947)
	total aggregate limit adjustments	(594,292)
41	,	, , ,
	UPL amount after aggregate limit adjustments	77,216
	Amount paid in April 2013 for 1st - 3rd quarters	57,912
	SFY2013 4th quarter UPL adjustment	19,304
	Outpatient overpayment reduction	(96,787)
	UPL funds - payout or recovery	(77,483)
	Intergovernmental transfer amount	0
	Net funds amount	(77,483)

	Facility Name	Phoebe Worth Medical Center
2	base period report period beginning date	08/01/09
3	base period report period ending date	07/31/10
4		
5	adjustment factor (if period not equal to 1 year)	1.0000
6		
7	CAH status (1 = yes)	1
8		
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	241,890
11	payments for services	131,589
12	5	241,890
13	annual payments for services	131,589
14		
15	inpatient CCR	0.580406401
16		
17	annual cost of services	140,395
18		
	<u>adjustment factor</u>	
20	inflation	1.028252
21		
	adjusted annual charges	248,724
23	adjusted Medicaid payments for services	135,307
	supplemental rate adjustment payments	0
	total adjusted Medicaid payments	135,307
26	adjusted cost of services	144,361
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Private
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	144,361
35	facility specific UPL amount	9,054
36		
37	aggregate limit adjustments	
38		(45)
39	allocation of supplemental payments	(7,968)
40	total aggregate limit adjustments	(8,013)
41		
	UPL amount after aggregate limit adjustments	1,041
43	Amount paid in April 2013 for 1st - 3rd quarters	781
44	SFY2013 4th quarter UPL adjustment	260
	Outpatient overpayment reduction	(22,301)
46	UPL funds - payout or recovery	(22,041)
47	· ·	0
	Net funds amount	(22,041)

	Facility Name	Stewart Webster Hospital
2	base period report period beginning date	10/01/09
3	base period report period ending date	09/30/10
4		
5 6	adjustment factor (if period not equal to 1 year)	1.0000
7	CAH status (1 = yes)	1
8	, ,	
9	Medicaid inpatient claims paid at amount > 0:	
10	covered charges	211,120
11	payments for services	165,272
12	annual covered charges	211,120
13	annual payments for services	165,272
14		
15	inpatient CCR	0.817790712
16		
17	annual cost of services	172,652
18		
19	adjustment factor	
20	inflation	1.020655
21		
22	adjusted annual charges	215,481
23	adjusted Medicaid payments for services	168,686
24	supplemental rate adjustment payments	0
25	total adjusted Medicaid payments	168,686
26	adjusted cost of services	176,218
27		
28	other UPL calculation data	
29	provider category for UPL calculation	Private
30	basis for UPL calculation	cost
31	DRG differential adjustment rate	0.000000
32	maximum annual payments (at DRG differential)	0
33		
34	maximum annual payments	176,218
35	facility specific UPL amount	7,532
36		
37	aggregate limit adjustments	
38	allocation of UPL amounts < 0	(38)
39	allocation of supplemental payments	(6,628)
40	total aggregate limit adjustments	(6,666)
41		
42	UPL amount after aggregate limit adjustments	866
43	Amount paid in April 2013 for 1st - 3rd quarters	650
44	SFY2013 4th quarter UPL adjustment	216
45	Outpatient overpayment reduction	(4,433)
46	UPL funds - payout or recovery	(4,217)
47	Intergovernmental transfer amount	0
	Net funds amount	(4,217)